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"SALUS POPULI SUPREMA LEX"



CITY OF PORTSMOUTH

ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

for the Year 1954

including

THE REPORT OF THE PUBLIC ANALYST

COASBY & Co. LTD.
SOUTHSEA

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The Right Worshipful the Lord Mayor

COUNCILLOR G. A. DAY, J.P.

HEALTH SERVICES COMMITTEE

1954 - 1955

Chairman

ALDERMAN J. P. D. LACEY, O.B.E., J.P.

Vice-Chairman

ALDERMAN H. G. COOK

Aldermen

ALBERT JOHNSON MRS. S. A. C. SHARPE

Councillors

J. F. FREESTON	G. F. COLLINS	D. S. WALLACE, M.B.E.
M. J. E. WALLIS	H. SOTNICK	W. G. EDWARDS, J.P.
R. A. BRIDGER	T. J. SMITH	W. GREAVES
C. W. STEVENS	MISS H. M. BRADY	G. B. COOPER
G. S. FURNEAUX	J. OXLEY	L. J. EVANS
P. MCG. CORSAR		

Co-opted Members

MRS. L. L. ALLAWAY	MISS M. GAY, O.B.E.
MRS. C. E. ATKINS, J.P.	DAME ELISABETH KELLY, D.B.E., J.P.
MRS. D. BOWLES	MR. R. E. MORGAN
DR. H. K. CHILDS	MRS. L. C. NICHOLSON
DR. G. H. DUTHIE	MRS. D. SPITTLE

HEALTH AND HOUSING COMMITTEE

1954 - 1955

Chairman

ALDERMAN FRANK MILES, C.B.E., J.P.

Vice-Chairman

ALDERMAN A. W. WEST

Aldermen

ALBERT JOHNSON J. P. D. LACEY, O.B.E., J.P.

Councillors

A. G. ASQUITH-LEESON	P. J. PARKHOUSE	L. FLAGG
M. J. E. WALLIS	A. F. BICKNELL	W. J. B. TITHERADGE
R. A. BRIDGER	F. A. CURREY	E. W. MARRIOTT
G. A. DAY, J.P. (Lord Mayor)	MISS H. M. BRADY	MRS. H. M. KER
H. BELL	A. H. W. POPE	F. A. HARVEY
P. MCG. CORSAR		

The following ladies were co-opted to serve on the Committee
for housing purposes:

MRS. M. A. BROOKS; MRS. A. E. FERGUSON-BAKER; MRS. W. FIELDER

SENIOR MEMBERS OF HEALTH DEPARTMENT STAFF

*Medical Officer of Health,
Principal School Medical Officer,
Chief Administrative Medical Officer to the City Council and
Medical Officer of Health to the Port of Portsmouth*

T. E. ROBERTS, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.

*Deputy Medical Officer of Health and Deputy Principal
School Medical Officer*

R. WOODROW, M.B., CH.B., D.P.H.

*Senior Assistant Medical Officer of Health for Maternity and
Child Welfare*

RUBY N. E. PIKE, M.B., CH.B.

Vaccination and Immunisation Medical Officer

D. M. RICHARDSON, M.R.C.S., L.R.C.P. (4/1/54-10/7/54)

E. D. B. WOLFE, M.B., CH.B., D.P.H. (from 28/6/54)

*Assistant Medical Officer of Health and Assistant Maternity and
Child Welfare Officer*

AUDREY E. STEWART, M.B., CH.B., D.R.C.O.G.

Chief Sanitary and Port Health Inspector

W. F. APPLETON, F.R.San.I., F.S.I.A.

Veterinary Officer

R. SCOULAR, M.R.C.V.S.

Administrative Assistant

H. S. WOODCOCK

Executive Officer—Mental Health Service

A. F. T. ROSE

Superintendent Health Visitor

MISS E. M. BUSSBY, S.R.N., S.C.M., H.V.Cert., D.N. (Lond.)

Supervisor of Midwives

MISS D. J. KINSEY, S.R.N., S.C.M., M.T.D.


Joint Appointments with Regional Hospital Board

Consultant Chest Physician

J. H. DADDS, M.B., B.S., M.R.C.P.

Chest Physician

A. M. READ, M.R.C.S., L.R.C.P.



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Public Health Department,
Municipal Offices,
1 Western Parade,
Portsmouth.

*To the Chairman and Members of the Health Services Committee, and to the
Chairman and Members of the Health and Housing Committee.*

My Lord Mayor, Ladies and Gentlemen,

I have the honour to present the Annual Report on the Health of the City for 1954, which follows the lines indicated by the Ministry of Health.

Figures in brackets represent the corresponding numbers or percentages for the previous year.

HEALTH STATISTICS

(pages 28 – 33)

The Registrar General's return for the year 1954 reveals a decrease of 2,200 in the total population (including Service personnel), which is now estimated to be 243,600. Although by the end of the year some 8,863 (7,590) post-war properties were let, including 881 (1,043) requisitioned premises, there were still at that time 14,728 applicants on the list for re-housing (including 927 aged persons). It is, however, pleasing to report that the acceleration of the Health and Housing Committee's building programme, which was first noticeable in 1952, was fully maintained in the year under review. New dwellings were completed at the average rate of 150 per month throughout the year, and it is expected that this rate of completion will continue during 1955, while at the present time over 1,800 new dwellings are actually under construction.

As will be seen from Table I on page 30, the following are the main features of interest for the year under review:—

1. A slight increase in the birth rate from 15·21 in 1953 to 15·23 per thousand population, compared with 15·2 for England and Wales in 1954.
2. An increase in the maternity mortality rate from 0·52 per thousand total births in 1953 (the lowest ever recorded) to 1·31, compared with 0·69 for England and Wales.
3. A further decrease in the neo-natal mortality rate from 14·98 per thousand live births in 1953 to 14·01 (the lowest ever recorded), compared with 17·7 for England and Wales.
4. A slight decrease in the infant mortality rate from 23·80 per thousand live births in 1953 to 23·71 (both rates being amongst the lowest recorded), compared with 25·5 for England and Wales.
5. A decrease in the general death rate from 11·59 per thousand population in 1953 to 10·76 (the lowest ever recorded), compared with 11·3 for England and Wales.

6. A decrease in the death rate from the principal infectious diseases from 0·04 per thousand population in 1953 to 0·03 (the lowest ever recorded).

7. A further decrease in the death rate from all forms of tuberculosis from 0·21 per thousand population in 1953 to 0·185 (the lowest ever recorded), compared with 0·18 for England and Wales.

8. A slight increase in the death rate from cancer (including leukaemia) from 1·97 per thousand population in 1953 to 1·98, compared with 2·035 for England and Wales.

Consideration of the foregoing statistics, together with the summaries and tables on pages 28–33 of the Report, shows that the neo-natal mortality rate (deaths of infants under 4 weeks), the general death rate and those due to the principal infectious diseases and from tuberculosis were all the lowest hitherto recorded, while the infant mortality rate is equally satisfactory, those for the past three years, which together comprise the lowest rates recorded, being: 1952—23·24 (the lowest recorded), 1953—23·80, 1954—23·71. Thus, it may well be claimed that, so far as serious illness and mortality were concerned, 1954 like the two previous years was an exceptionally healthy one for the citizens of Portsmouth. The only unfavourable feature indeed is the increase in the maternal mortality rate from 0·52 per thousand live births to 1·31; this represents a total of five maternal deaths compared with two in the previous year—the lowest number ever recorded. The birth rate—15·23 per 1,000 population in 1954—has remained practically unchanged for the past five years.

It is apparent from the weekly returns of “New claims to sickness benefit,” kindly supplied by the local office of the Ministry of Pensions and National Insurance, that in 1954 there was no serious outbreak of influenza or other illness causing absence from work of insured persons such as occurred in the first quarters of the previous year and of 1951. Thus, the weekly average of 530 “new claims” was about the usual for a year free from an influenza epidemic and compares very favourably with a weekly average of 633 claims in 1953.

METEOROLOGY

Features of interest in the weather for 1954 are the low sunshine, the much higher rainfall than for the previous year, the intense cold spell in January/February and the increased number of gales. As temperatures generally were a little lower than in 1953, it can be said that last year compared somewhat unfavourably with its predecessor.

The total sunshine—1,553·8 hours—was 237·7 less than in 1953, although there were only 2 fewer days (273) on which $\frac{1}{2}$ hr. or more was recorded, 224·6 below the average for the past ten years, and the lowest since 1932. This reduced figure was responsible for relegating Portsmouth and Southsea from 16th to 23rd place in the sunshine table of health resorts on the mainland, and from 35th to 40th position amongst the 330 meteorological stations in the British Isles. Shanklin was again top of the list, with 1,779·2 hours. 1953's near-record low rainfall (19·71") was completely reversed by the recording of 33·13", which has only been exceeded on 9 other occasions in the past 65 years; it was 13·42" more than in 1953 and 5·54" above the average for the past 10 years. Measurable rain fell on 166 (126) days, 9·25" of it on 38 days during the holiday months of June, July and August.

The end of January and beginning of February witnessed a most unusual feature of what are normally mild winters in Portsmouth. Following a heavy fall of snow during the night of 25/26th January, the temperature fell rapidly and during the next 12 days the maximum only exceeded freezing point (32°F) on 4 occasions, the lowest being 28°, and the highest 39° on 6th February; the frozen snow continued to lie during this period, making the roads extremely hazardous and severely interfering with transport and travelling.

The following phenomena are worthy of note:—

Snow or sleet on 11 occasions, compared with five in 1953;
thunder on 11 occasions (1), 29 (9) gales, 19 (56) fogs, 59 (73) ground frosts.

Prevailing winds were from the south-west quarter.

NATIONAL HEALTH SERVICE ACT, 1946

Details have been given in previous Reports of the changes which took place in the administration of the health services and of the responsibilities devolving upon the local health authority when this Act came into operation on the 5th July, 1948, in accordance with the proposals submitted to the Minister in 1947–1948, and there was included in the Report for 1952 (pages 9–29) a “Special Survey of Local Health Services provided under the National Health Service Acts” as existing at the end of that year. Any subsequent developments are referred to in the sections which follow.

Cordial co-operation between the three main branches of the National Health Service on the lines indicated in the Special Survey (pages 10–12 of 1952 Report) has been maintained throughout the year, although there is little new to record. It was decided to issue a comprehensive Health Services handbook giving details of the services for which the Portsmouth Group Hospital Management Committee, the Executive Council and the Authority are responsible; this was published in March, 1955.

(1) SECTION 21 (HEALTH CENTRES)

No further progress has been made regarding the provision of health centres, either at Paulsgrove or elsewhere, but in the City Development Plan the erection of a health centre at Paulsgrove in 1955–1957 is included in the programme for the first five years; during the fifteen-year period commencing 1st April, 1958, it is hoped to provide three principal health centres—for the Central and Southern, North Portsea, and Cosham areas respectively and subsidiary health centres at Southsea, Milton, Copnor and Farlington.

(2) SECTION 22 (CARE OF MOTHERS AND YOUNG CHILDREN)

SECTION 23 (MIDWIFERY)

SECTION 24 (HEALTH VISITING)

(pages 37–44)

For the past five years the annual birth rates have remained remarkably constant at the lower post-war level of 15 per thousand population, which corresponds closely with those for the immediate pre-war years 1933–39, the rate for the year under review being 15·23 per thousand population (3,711 total live births) compared with 15·21 in the previous year, and 15·22 in 1950. During the war years, however, the birth rates were on a higher level reaching a post-war peak of 24·29 (5,149 births) in 1947—the highest birth rate since 1920.

Domiciliary confinements numbered 1,599 (1,578), equal to 42% (41%) of the total births—the highest proportion delivered since the war by municipal midwives—while of the remainder approximately 39% of patients were confined in the maternity sections of Saint Mary's Hospital and its annexes, and 723 (883), or 19%, in private nursing homes (including the Royal Naval and Royal Marine Maternity Home). The average number of cases attended by each municipal midwife during the year was 88·8 (85·7).

MATERNAL MORTALITY

There were five deaths in respect of which pregnancy was considered to be the primary cause compared with two in the previous year when the maternal mortality rate, 0·52 per thousand births, was the lowest ever recorded. From the details given on page 37 it will be seen that, included in the maternal deaths for 1954, is one relating to a confinement which took place no less than thirty years ago.

INFANT MORTALITY

The death rate of infants under one year—23·71 per thousand live births—was again very favourable; indeed, those for the past three years together comprise the lowest rates recorded: 1952—23·24 (the lowest recorded), 1953—23·80, 1954—23·71. The neo-natal mortality rate (deaths of infants under four weeks) of 14·01 per thousand live births was also exceptionally good, in fact the lowest recorded.

DAY NURSERIES

In view of the decreasing demand for places following the introduction of a new scale of assessment in March, 1953, which increased the weekly charges considerably to all but the lowest income groups, three of the day nurseries were closed in that year. In 1954 there were 172 (183) admissions to the three remaining nurseries, in which there are places for 116 children, but owing to the reduced number of places occupied the total complement was amended to 75, with the appropriate adjustments amongst the staff.

At present the day nurseries are situated at (a) St. Peter's Institute, Somers Road—old complement 46, revised 30, (b) Twyford Avenue—old complement 40, revised 25, (c) Anglesea Road—old complement 30, revised 20.

NURSERIES AND CHILD MINDERS REGULATION ACT, 1948

Two premises providing accommodation for 42 children were visited, inspected and registered during the year. At the end of 1954 there were in all sixteen premises registered under this Act providing accommodation for 325 children; there were also three daily minders registered to receive 19 children.

HEALTH VISITING

At the end of the year 23 health visitors were employed, compared with 22 in 1953, and the total visits paid numbered 62,708 (58,028), of which 52,310 were to children under five, 5,171 to other age groups, especially the aged, and 5,227 to persons suffering from tuberculosis.

PREVENTION OF BREAK UP OF FAMILIES

The plight of the "problem family" has long been known, and is one which has engaged the attention of medical officers, health visitors and social workers, etc. since the beginnings of public health in this country. Broadly

speaking, these families fall into two categories—those in which the problem is one of ignorance, and the remainder where the problem is indifference. In the former the answer is in some measure given by education, and in the latter by rehabilitation. The person who can do most in this field is the health visitor with, of course, the help and co-operation of other welfare organisations. In Portsmouth the health visitors personally contact the various agencies in the City about the “problem families” in their own districts, as it is realised that a certain number of these families are well known to all, and by co-ordination of effort it is often possible to help.

In August, 1954, the Lord Mayor of Portsmouth, Councillor G. A. Day, J.P., showed his interest in this problem by setting up an Advisory Panel on Problem Families, which has done a remarkable amount of work and has met with some striking successes. This panel consists of representatives of the Health, Welfare Services and Education Departments, the City Police and Probation Departments, the National Assistance Board, and various local voluntary bodies—the Rotary Club, W.V.S., N.S.P.C.C., Family Welfare Association, etc. etc.—and they meet as occasion demands. At their meetings individual cases are discussed and normally one member of the panel is delegated to follow up the problem. Practical aid is given in some instances where it is felt that this is the best solution. One of the main objects of the panel is, of course, the free exchange of information.

The Ministry of Health issued a circular in November, 1954, on “The Prevention of Break-up of Families,” and at a special meeting of health visitors and other members of the staff this problem was discussed to see what further steps could be taken to assist. It was pointed out that the health visitor, with her special knowledge of the families in her own area, was able to recognise the early symptoms of a break up, and by close liaison with other agencies, both local authority and voluntary, was often able to prevent further trouble.

“Problem families”, of whom there are some 50–60 known to the Health Department, are kept under constant supervision, and where necessary home helps are made available. In other cases children have been admitted to one of the day nurseries when it was found that the mother's health was suffering, due to bad housing conditions, overcrowding, etc., and this has proved a satisfactory measure in that her health has improved and she is thus better able to cope with the junior members of the family. The matrons of the day nurseries have also helped in these cases by education of the mothers when they call to collect the children each day, and a raising of the standard of general hygiene has resulted in many instances. Frequent visits are made to the Family Unit at St. Mary's House where there are approximately 20 families in residence, most of them prospective “problem families”. Advice is given on diet, general hygiene, budgeting, and every step is taken to rehabilitate them.

This work is only in its infancy so far as intensive education campaigns, etc. are concerned, but the impression is already gained that the hard core of “problem families” in Portsmouth is being gradually reduced.

(3) SECTION 25 (HOME NURSING) (page 46)

The Portsmouth Victoria Nursing Association, founded in 1884, which had for many years prior to the “appointed day” provided a very efficient service of home nursing in the area, has continued this service under the general control of the Authority. As will be seen from the report of the Secretaries (page 46), an average of 37 (35) nurses was employed, 19 (18) at Radnor House and 18 (17) at Beddow House, the total number of cases attended being 5,264 (5,613) and visits paid 109,472 (100,073).

Nursing equipment is supplied on loan to patients from a stock held by the Victoria Nursing Association; this is additional to that issued from the medical loan depots of the St. John Ambulance Brigade and British Red Cross Society.

(4) SECTION 26 (VACCINATION AND IMMUNISATION) (pages 47–50)

(a) VACCINATION

The proportion of infants vaccinated during the first year of life was similar to that of recent years—1,172 vaccinations, or 31·6% of the total births, compared with 35·4% in the previous year and 31·0% in 1952; of this number 798 infants were vaccinated by their family doctors and 374 by medical officers of the Health Department. Total vaccinations numbered 2,870 (3,488), of which 2,209 (2,584) were primary and 661 (904) re-vaccinations.

(b) IMMUNISATION

During the year 3,499 (3,243) children were given a complete course of immunisation against diphtheria and 7,169 (5,292) a supplementary injection; the latter figure shows a very satisfactory increase, as does the proportion of children immunised by private practitioners which has increased from 31·6% in 1953 to 38·2%. The total number of children immunised since the inception of the scheme in 1935 is now 80,384.

The success of the diphtheria immunisation scheme is clearly shown in the appended table giving the yearly statistics of confirmed cases of diphtheria admitted to hospital and deaths from this disease.

<i>Year</i>	<i>Admitted to hospital</i>	<i>Died</i>	<i>Year</i>	<i>Admitted to hospital</i>	<i>Died</i>
1938	302	14	1949	7	1
1940	79	4	1950	1	—
1942	75	2	1951	5	1
1944	17	2	1952	—	—
1946	17	—	1053	1 (Haslar)	—
1948	6	—	1954	—	—

Immunisation against whooping cough (pertussis) also shows an increase, 2,126 children having completed a full course of three injections, compared with 1,407 in 1953.

(5) SECTION 27 (AMBULANCE SERVICE) (pages 51–54)

During the year 63,567 (63,730) patients were conveyed—a decrease of 163 or 0·2%, compared with 1953—of whom 14,271 (15,102) were stretcher and 49,296 (48,628) sitting cases. Patient carrying mileage was 242,791 (244,182)—a reduction of 1,391 or 0·5%, compared with the previous year.

Installation of radio-telephony on eighteen first-line vehicles in March, 1953, has proved of immense benefit—not only by increasing the general efficiency, and speed of dealing with emergencies, but by a reduction of nearly 10% in the “average mileage per patient carried” from 4·2 miles in 1952 to 3·8 in 1953–54. Thus, it was possible for the Ambulance Service to deal with a greater number of patients in each of the last two years without increasing the staff or vehicle establishment, the total mileage being actually less than the peak figure of 250,940 in 1952, when only 59,421 patients were conveyed.

<i>Year</i>	<i>Patients Carried:</i>			<i>Patient Carrying Mileage</i>	<i>Av. Mileage per Patient</i>
	<i>Stretcher</i>	<i>Sitting</i>	<i>Total</i>		
1952	14,642	44,779	59,421	250,940	4.2
1953	15,102	48,628	63,730	244,182	3.8
1954	14,271	49,296	63,567	242,791	3.8

(6) SECTION 28 (PREVENTION OF ILLNESS, CARE AND AFTER-CARE)

This Section, as its title implies, authorises the local health authority, with the approval of the Minister, to provide a comprehensive service for the improvement of public health in its area. This provision is permissive unless the Minister otherwise directs, and up to the present such directions have been given in respect of tuberculosis alone.

The proposals submitted to and approved by the Ministry of Health provided for the full utilisation of the facilities of the Mass Radiography Unit in the diagnosis of chest diseases, the supply of milk to tuberculous patients, and the development of occupational therapy and rehabilitation in co-operation with the Tuberculosis Voluntary Care Committee. The system of domiciliary visiting has been extended by the appointment of tuberculosis visitors.

The Authority has not, as yet, developed any further extensive scheme for care and after-care, but consideration is given to cases requiring special attention, such as home help, supply of nursing equipment or convalescent treatment, and in the care of the aged in their own homes the scope of the health visitor's work is continually increasing. In addition, a considerable proportion of the work of the Mental Health Service (pages 66-68) is concerned with the "care and after-care" of persons suffering from mental defect or mental illness under this Section of the Act.

Although the establishment of local authority medical loan depots and the extension of those already operated by voluntary organisations was envisaged in the proposals, the financial position has not allowed this. Nursing equipment has, therefore, continued to be issued on loan by the Victoria Nursing Association, the St. John Ambulance Brigade and the British Red Cross Society. Some items of equipment are, however, supplied by the Local Authority for the permanent use of patients nursed in their own homes, charges, where appropriate, being made in accordance with the Authority's approved scale of assessment. Convalescent home treatment is also provided for patients in need of recuperative rest after illness or operation, on the recommendation of either a medical practitioner or a hospital medical officer; here, again, a charge is made if the patient's means allow it.

HEALTH EDUCATION

The Health Services Committee renewed the usual grant (25% of which is contributed by the Education Committee) to the Central Council for Health Education, in respect of their advisory, propaganda and publications services.

Health Services Handbook

The preparation of a new edition of the Health Services handbook (the fourth) was put in hand. For the first time, the Local Executive Council and the Portsmouth Group Hospital Management Committee were invited to collaborate, with a view to producing a comprehensive review of the health services available in the City; this was published in March, 1955.

Filmstrip Projector

The filmstrip projector was well used by health visitors and midwives at the child welfare centres, and also in the instruction of student nursery nurses, and the training of members of the Civil Defence Ambulance Service. Opportunity was taken whenever appropriate to add to the filmstrips so as to build up a comprehensive collection of adequate variety.

Posters and Articles

Large posters were displayed throughout the year on the former Empire Marketing Board hoardings in the Guildhall Square and on Fratton Bridge, and smaller ones at the child welfare centres, school clinics, etc. New posters are always welcome and are eagerly sought after.

Towards the end of the year an interesting diversion was provided by the visits of a reporter and a photographer from *John Bull* in connection with an article they were preparing on the work of a Medical Officer of Health. (This article was published in their magazine for the week ending 15th January, 1955.)

Mass Radiography

Corporation staffs were encouraged to visit the Mass Radiography Unit in January for the annual health check, and in the autumn sessions were again held for the general public. This year the W.V.S. very kindly staffed three appointment bureaux (instead of the two bureaux held in previous years) for one week, at the Landport Drapery Bazaar, Co-operative House and Rigbys'. I am grateful to the managements of these businesses for the use of their valuable space for this purpose. As a result, 3,935 people attended the reserved sessions, and a further 1,595 the open sessions, at the Unit.

B.C.G. VACCINATION AGAINST TUBERCULOSIS

As early as 1946 B.C.G. vaccination was used in Portsmouth on a small scale to confer increased resistance to infection on persons at special risk, for example, those living in the same house as an active case of tuberculosis, nursing staff, etc. In 1949 a similar "contact scheme" was approved by the Minister under this Section of the Act, and in the year under review 355 (235) persons, in the main tuberculin-negative children, were vaccinated under these arrangements.

In 1949 Portsmouth was one of seventeen areas selected by the Medical Research Council to take part in a nation-wide tuberculin survey of school children and adolescents, the object of which was to determine what proportion of this section of the population had ever been infected with tuberculosis. Some 5,350 individuals aged 5-20 years were examined by X-ray and skin testing in the course of the survey, and it was found that amongst "school leavers" only one-third were tuberculin-positive as a result of having acquired some degree of immunity to tuberculosis, while the remainder were completely unprotected. Statistical evidence over a number of years, moreover, showed that there is a high incidence of active tuberculous infection in young adults, and it was accordingly recommended that all negative reactors to tuberculin should be protected by B.C.G. vaccination during their last years at school.

By Ministry of Health Circular No. 22/53 authority was given to proceed with the vaccination of school children between the ages of 13 and 14 years, and in 1954 the scheme for Portsmouth was approved by the Minister. Before proceeding with detailed planning, consultations were held with the

head teachers concerned and the Consultant Chest Physician to secure agreement on the best method of operation. Later, when the scheme was ready to start, a circular was sent to all medical practitioners in the area giving details of the proposed procedure. Vaccination actually commenced in October, 1954. The Vaccination and Immunisation Medical Officer, who is responsible for the day-to-day operation of the scheme, attended Great Ormond Street Hospital for the necessary training in the techniques involved before undertaking vaccinations in Portsmouth. Briefly, the procedure is as follows:—

1. With the exception of the secondary grammar schools, where the whole of the 13–14 age group is dealt with at once in the spring term, the aim is to offer vaccination to all pupils in the six months preceding their fourteenth birthday. Consent forms and an explanatory leaflet are issued to parents via the head teacher, who is also responsible for their return to the Health Department.
2. A nurse visits the school and carries out preliminary tuberculin testing of all pupils whose parents have given consent to vaccination. This testing is done by means of a multiple puncture apparatus which is less painful than an intradermal injection. Children already under observation at the Chest Clinic are not given this preliminary test, nor is vaccination normally carried out at the school.
3. The medical officer visits within four days of the preliminary test, inspects it, and vaccinates those children who are tuberculin-negative. Certificates of vaccination are sent to the parents of these pupils.
4. Parents of positive reactors are informed of this fact, and it is suggested that the child take advantage of an appointment for chest X-ray at the Mass Radiography Unit, and, at the same time, other members of the family are also invited to attend for X-ray. It is emphasised that a positive tuberculin test does not necessarily mean an active tuberculous infection is present, but probably that the child has already acquired a natural resistance to the disease.

Details of the numbers dealt with in the first three months under the "School Children's Scheme" are given in the table on page 50, from which it will be seen that 544 forms were sent to the parents of children aged 13½–14 years and 88% agreed to tuberculin testing and B.C.G. vaccination being done, if found necessary. Subsequently, fourteen schools were visited and 429 children were tested; of these 79·8% were tuberculin-negative and 332 were vaccinated. Positive reactors numbered 84—20·2% of those tested—of whom seven were already attending the Chest Clinic, and 77 were given appointments for the Mass Radiography Unit.

TUBERCULOSIS (pages 55–59)

In his informative and encouraging report on page 55 the Consultant Chest Physician points out that, in addition to the accelerated fall in the death rate from pulmonary tuberculosis, a comparable decrease in the incidence of this form of the disease is at last beginning to manifest itself. This trend is clearly shown by a decline in the primary notifications of pulmonary tuberculosis, which numbered only 200 in 1954, compared with 260 in the previous year and 312 as recently as 1950.

As will be evident from the appended table, showing deaths from tuberculosis annually for the period 1947–1954, the dramatic decline in the mortality from this disease which has been such a favourable feature of the

past eight years has continued during the year under review:—

	RESPIRATORY			NON-RESPIRATORY			COMBINED		
	M.	F.	Total	M.	F.	Total	M.	F.	Grand Total
1947 ...	84	60	144	10	10	20	94	70	164
1948 ...	69	51	120	7	3	10	76	54	130
1949 ...	62	36	98	5	4	9	67	40	107
1950 ...	56	31	87	6	2	8	62	33	95
1951 ...	39	21	60	5	1	6	44	22	66
1952 ...	40	11	51	7	4	11	47	15	62
1953 ...	30	16	46	4	2	6	34	18	52
1954 ...	24	14	38	3	4	7	27	18	45

From the foregoing statistics it will be seen that in 1954 only 38 persons—24 men and 14 women—died of pulmonary tuberculosis, whereas in 1947 144 persons—84 men and 60 women—died of this disease. It is considered that improved methods of treatment by new drugs and thoracic surgery, together with the work of the Mass Radiography Unit in finding cases in the earlier and more treatable stages of the disease, share the credit for this truly remarkable achievement.

MASS RADIOGRAPHY (pages 60–65)

During the year the Mass Radiography Unit operated in the City, with the exception of 10 weeks when surveys were made in the Isle of Wight, in Horsham town and at Christ's Hospital.

A total of 48,920 (46,058) X-ray examinations was carried out during the year, the highest number ever recorded, including 37,007 (34,092) in Portsmouth of which 102 (99) persons were found to have *active* pulmonary tuberculosis—equal to a rate of 2·76 (2·9) per thousand examined—thus continuing the welcome decline in the proportion of cases of active disease found in Portsmouth, a fall noted for the first time in 1951. Once again the most fruitful source of referral for discovering active cases was from general practitioners—the 2,513 (2,414) persons referred by them for investigation at the Unit resulting in the diagnosis of 25 cases of active disease or 9·95 per thousand examined (Table IV), compared with an incidence of only 1·23 per thousand found in school groups, 2·03 in industrial groups, 2·09 in National Service recruits and 2·16 amongst members of the general public examined by X-ray.

In his most interesting report on pages 60–65, Dr. Lendrum again emphasises “the necessity to attract those who have not been through the Unit previously.” He also calls attention to a change in the age distribution of the active cases (Table II); whereas previously the highest incidence of the disease was found in men over 60—that for women in this age group being comparatively low—during 1954, in both sexes “the rate per thousand of active pulmonary tuberculosis” was highest in persons over 60. The incidence, however, continues to be relatively high in males under 35 and in females under 25, thus affording ample justification for the attempt, by

B.C.G. vaccination of school leavers, to enhance the resistance to the disease of adolescent boys and girls before they become exposed to the special risk of infection in early adult life.

(7) SECTION 29 (DOMESTIC HELP) (page 40)

The Home Help Service provides domestic assistance in households where such help is required "owing to the presence of any person who is ill, lying-in, an expectant mother, mentally defective, aged, or a child not over compulsory school age." The accent is still on old people and an increasing number is being looked after by this service.

A further development during the year was the introduction of the "group home help scheme", under which specially selected home helps were appointed exclusively to look after groups of old people living in close proximity to each other. The scheme started with four groups in the Copnor area and two more were added later; as circumstances permit, the scheme will be extended to other districts. The project, after some initial difficulties, was attended by success—the persons being assisted find it a great advantage to have the same help attending them all the time and the helps find it less tiring, as it does not involve much travelling.

During the year, home helps, who are all part-time, attended 654 cases and worked $80,800\frac{1}{4}$ hours, compared with $74,334\frac{1}{4}$ in 1953, and at the end of the year 56 were employed.

(8) SECTIONS 28 & 51 – PART V OF THE ACT (MENTAL HEALTH SERVICES) (pages 66–68)

The organisation of the Mental Health Service has continued as was described in last year's Report and outlined in that of the Executive Officer for the year under review; on 1st May, 1954, the offices were transferred to 28/29 Western Parade from their temporary accommodation in the Pier Hotel.

Cases of alleged mental illness dealt with by the Service show a further increase, 566 persons having been referred, compared with 515 in the previous year and 457 in 1952, while at the end of 1954 there were 232 mental defectives under statutory supervision and a further 401 under "voluntary supervision"—not being "subject to be dealt with."

The present Occupation Centre at Milton Church Hall provides for some 70 mental defectives of both sexes (another 20 cases being on the waiting list for admission), and a senior female class of 20 meets in another church hall four times weekly, under the handicraft instructress who also gives some home teaching to selected cases. During the year, after consideration of the urgent need to provide more suitable premises and to expand the facilities for training generally, the Council obtained the approval of the Minister to the erection of a new "Day Training Centre" for 137 mental defectives on the Eastern Road, and by the end of the year preparation of plans was in progress. It is hoped that building will commence about October, 1955, and that it may be completed during the summer of 1956.

CARE OF THE AGED

The care of old people, both in their own homes and in institutions, is a problem upon which attention has been focused with increasing concern during recent years. The essence of the matter is to assist elderly people to remain for as long as possible in health and comfort in their own homes, but to ensure that hospital, hostel or other institutional accommodation is available when needed. As mentioned in last year's Report representatives of various interested bodies in the City attended a meeting to discuss the

present facilities for the care of old people, methods of improving them and means of establishing closer co-ordination between the local authority, hospital and voluntary services interested in the problem. One immediate result of this meeting was the inauguration of the "Pilot" scheme of home help for old people, to which reference is made elsewhere in this Report, and, although there is no clear evidence that the operation of this scheme has materially prevented the admission of cases to hospital, there is no doubt that the regular attendance of the same home help has been beneficial to the general well-being of the old people concerned.

The schedule below gives details of institutional accommodation, apart from hospitals, available for old people in Portsmouth.

Local Authority Provision

So far as the Local Authority is concerned, the body responsible for residential care of aged persons is the Welfare Services Committee, and they had made the following provision by the end of the year. In addition, Margaret House, with accommodation for 35 aged persons, was almost complete, and plans were being prepared for the adaptation of Flint House and the erection of two further homes—at Stone Street and Link Road, Cosham—which, together, will provide accommodation for a further 130 persons.

HOME	ACCOMMODATION
St. Mary's House, Portsmouth.	515 total—top floor rarely used
St. Vincent Lodge, Kent Road.	35
St. Bernard Lodge, Merton Road	42
Jubilee Homes for the Blind, Cosham.	28
Elizabeth House, Wymering.	35

Voluntary Provision

RESPONSIBLE AUTHORITY	TYPE OF ACCOMMODATION
Portsmouth Social Service Council, Old People's Welfare Committee.	Sunbury Court, Festing Road (hostel). Accommodation for 26 old ladies.
Women's Voluntary Services	Kelly Homes, Northern Parade. (Five bungalows for married couples)
The Church Army	Queen Anne Lodge, Nightingale Road (hostel). Accommodation for 20 old ladies.
Committee of Management (C. of E.)	Churchill House, Ashburton Road (single rooms with kitchenette). Accommodation for 10 residents.
Chairman—Rt. Rev. Bishop A. L. Kitching	Home of Comfort, Victoria Grove (registered nursing home). Accommodation for 10 infirm ladies.
The Forces Help Society	Princess Christian Home, Grand Parade (hostel). Accommodation for 14 pensioners—male (some infirm).
Friendly Society's Homes	Glasgow Road, Southsea. 24 flats—16 single, 8 for married couples. Canal Walk, Landport. 9 flats—all for married couples (6 flats only fit for use at present time—remainder, on top floor, considered unsafe). Proposals are still under discussion for the renovation of the whole of this block.

In addition to residential provision, assistance to elderly persons in their own homes occupied the attention of not only the Local Authority but also voluntary bodies in the City. The Old People's Welfare Committee continued to expand and extend their programme. Recreational activities included parties, outings, the provision of wireless, food parcels, and many other forms of social service, including twelve "Good Companions" Clubs all of which are self-supporting and have long waiting lists. These clubs do a tremendous amount to relieve the loneliness of old people living by themselves, and also encourage members to help each other by friendly visiting, etc. The Committee maintain a close liaison with hospital almoners and health visitors and are often able to assist in cases referred to them from these sources. They undertake a good deal of visiting and, in short, co-operate generally with all other bodies, both official and voluntary, who are interested in the welfare of old people. Since they commenced their work the Committee have long realised the need for "Half-way Houses", i.e. accommodation for elderly people who do not need hospital care but are not fit to enter a hostel or remain at home, and it is now hoped that a plan for such accommodation will be evolved in the near future in view of the great shortage of geriatric beds.

The Women's Voluntary Services' "meals on wheels" service delivered a two-course meal to between 45 and 50 old people twice a week during the year, and the mobile library which they continue to operate in conjunction with the City Librarian is still a most popular service. Their four "Darby and Joan" clubs have a membership of about 700 and a waiting list, and members of the service are always willing to visit lonely old people.

SECTION 47, NATIONAL ASSISTANCE ACT, 1948

Section 47, which gives local authorities power to effect the removal to hospital of persons who, because of grave chronic disease or being aged, infirm or physically incapacitated and living in insanitary conditions, are unable to devote to themselves, and are not receiving from other persons, proper care and attention, was amended by the National Assistance (Amendment) Act, which came into force on 1st September, 1951. Briefly, this means that it is now possible to arrange for the removal of persons in need of care and attention immediately; formerly it was necessary to give seven clear days' notice.

It was necessary to apply for Orders under this Section of the Act in five cases during 1954, all of whom were elderly people in need of care and attention and/or living alone. In two cases it was necessary to obtain Renewal Orders, as the persons concerned were still unwilling to remain in an institution voluntarily. It is usually found, however, that once the old people are established in a comfortable environment they are quite willing to settle there without further compulsion being exercised.

Numerous other cases were investigated and visits made by health visitors, sanitary inspectors and members of the medical staff to elderly persons living alone or receiving inadequate care. The number of cases dealt with, particularly by health visitors, has again increased, some 2,500 visits being made by them in connection with the care of old people during 1954. Action taken to remedy the unsatisfactory conditions found in some of these cases included the provision of home help or home nursing, supply of clothing and bed linen through voluntary agencies or the National Assistance Board, etc; some were persuaded to enter St. Mary's House voluntarily, while others are still being kept under regular supervision so that further action may be taken should conditions deteriorate.

EPILEPTICS AND SPASTICS

Epileptics

Epilepsy is not a major problem amongst the school population as most of the cases are of a minor nature who are well controlled and can mix with their fellows for educational purposes. There are now some 82 children up to the age of sixteen years known to the School Health Service to be so afflicted. In addition, three children are being educated in boarding special schools because of the severe nature of their disease and/or associated difficult behaviour.

At St. James Hospital specialist advice and treatment is available to persons suffering from this condition, and some 100 patients of all ages attend regularly. Most epileptics are referred by their own general practitioner for original assessment and guidance regarding treatment—this being carried out finally by the general practitioner concerned.

The biggest problem is that of employment, there being such a small field in which epileptics can be successfully employed without fear of damage to themselves or others. When an epileptic child leaves school special consideration is given by the Youth Employment Officer on the advice of the School Medical Officer. The Disablement Resettlement Officer has kindly supplied the information that there are 120 sufferers from epilepsy who are registered disabled persons—92 males and 28 females, of whom about 25% are often unemployed. Three epileptics are employed at the Workshops for the Disabled run by the Welfare Services Committee, and several more have had rehabilitation and training courses arranged for them by the Ministry of Labour, after which they have been successfully placed in work.

Epileptics who are also in some degree mentally defective are kept under constant supervision by the Mental Health Service.

Difficulty is still experienced by the Disablement Resettlement Officer in placing epileptics in suitable employment due to the disrupting influence on other employees when an epileptic has a fit, and a potential employer's fear of this, although it is considered that, on the whole, epileptics make good workers.

It will be noted that the numbers quoted in this Report show an increase on last year. It is not considered, however, that this is a true increase in the number of persons suffering from the disease, but merely that difficulty in keeping employment has resulted in more persons registering as disabled persons. In 1953 the Ministry of Labour and National Service issued a very useful pamphlet, D.P.L.5. on "Employment of Epileptics", which is worthy of study.

Spastics

There are some 53 children up to the age of fifteen years known to be suffering from all degrees of cerebral palsy, of whom 8 have home teaching, 7 attend day special schools in the City and 2 are in residential special schools; 8 are ineducable, and the rest attend ordinary schools.

Of the 10 known spastics aged 15–18 years, 6 are in full employment and making satisfactory progress, 1 boy is trainable for employment and 3 are thought to be unemployable.

All cases of cerebral palsy are periodically reviewed either by the surgeon from the Lord Mayor Treloar Orthopaedic Hospital, Alton, or the Physical Medicine Specialist in Portsmouth. All who are capable of benefiting from physiotherapy, etc. receive it, and school children attend for speech therapy as required.

Co-operation between statutory and voluntary bodies to meet the special needs of cerebral palsied children was recommended in Ministry of Health Circular No. 26/53, and in Portsmouth this has resulted in a scheme to provide for the medical care, education and training needed for the City's most severely handicapped spastic children. Portsmouth Group Hospital Management Committee has kindly made available a site for a specially designed building within the grounds of Queen Alexandra Hospital, Cosham, and adjoining the Department of Physical Medicine, so that treatment by physiotherapy may be given under the supervision of the consultant. The Education Committee will provide the services of a teacher and the necessary educational equipment, whilst the children will be conveyed by the Municipal Ambulance Service. Facilities will be available for about twenty children including, by arrangement with the Hampshire County Council, a few from outside the City boundary.

Through the generosity of the citizens and aided by grants from Trusts, the Portsmouth and District Spastics Society will be able to meet the capital cost of the Unit, estimated at about £10,000. In this project the Society has been encouraged by the personal interest of H.R.H. the Duke of Edinburgh. By gaining the support of the local building industry, which is donating materials for the construction of the Unit, the Lord Mayor of Portsmouth, Councillor G. A. Day, J.P., the Society's President, ensured an early start to the building, which commenced in May, 1955, and it is hoped that the Unit may be in operation by the end of the year.

BLIND PERSONS

Under Section 29 of the National Assistance Act the Welfare Services Committee is responsible to the Council for the welfare of the blind; the information given in the appended table regarding registered blind and partially sighted persons has accordingly been provided by the Director of Welfare Services:—

A.—FOLLOW-UP OF REGISTERED BLIND AND PARTIALLY SIGHTED PERSONS

(i) Number of cases registered during the year in respect of which para. 7 (c) of Form B.D.8 recommends:	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(a) No treatment ...	12	5	2	44
(b) Treatment (medical, surgical or optical) ...	20	9	—	14
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment	11	7	—	10

There have been no further confirmed cases of retrolental fibroplasia since September, 1952, when it became obvious that excessive concentration of oxygen in the "Oxygenaire" box was responsible for the condition, and simple practical steps were taken to obviate this. One doubtful case has been observed recently, but it is considered that vision will not be affected, and no treatment was undertaken.

B.—OPHTHALMIA NEONATORUM

(i) Total number of cases notified during year ...	3
(ii) Number of cases in which:—	
(a) Vision lost	NIL
(b) Vision impaired	
(c) Treatment continuing at the end of year ...	

It will be noted that only three cases of ophthalmia neonatorum were notified during the year, compared with four in the previous year and fourteen in 1952, and in none of these was there any impairment of vision.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES (pages 69–76)

As will be seen from the table on page 71, there was a marked decline in the incidence of nearly all the infectious diseases during the year under review, when the total cases notified numbered only 1,066, compared with 4,433 in 1953. The largest decreases occurred in scarlet fever—171 notifications, compared with 341; measles—only 46, compared with 2,920 in the previous year when there was a severe epidemic; whooping cough—409, compared with 634; pneumonia—35, compared with 68; and tuberculosis—pulmonary 200, compared with 260; other forms, 16, compared with 24 cases notified.

There were, however, small increases in all the intestinal diseases including:—two cases of typhoid fever and three of paratyphoid (of whom two were carriers)—a total of five cases, compared with four in 1953; 25 cases of dysentery, mostly of Sonn  type, compared with 14; and 36 cases of food poisoning, compared with 28. These are fully discussed in the section on “Food and Drink Infections” on pages 25–26, as is the outbreak at a local institution.

No case of diphtheria was notified and none proved to be this disease on admission to hospital. Meningococcal infection showed an increase (11 : 8), but the incidence of poliomyelitis was the lowest for many years—only three confirmed cases (two paralytic and one non-paralytic), compared with thirteen in 1953 when the incidence of this disease was also very low in Portsmouth. There were two deaths from meningococcal infection, three from whooping cough and one from food poisoning.

CANCER (page 72)

Although the total number of deaths from this disease, which since 1952 has included leukaemia, was one less than in 1953—482, compared with 483—the death rate, owing to a decrease in the total population, shows a slight increase from 1.97 per thousand in 1953 to 1.98, compared with 2.035 for England and Wales. Consideration of the table on page 72 reveals an increase in male deaths of 22—from 255 to 277—nearly all of which is due to cancer of the lungs and bronchi (87 : 70); there has, however, been a welcome decline in female deaths from this variety of cancer (9 : 18) as well as in their total deaths (205 : 228).

The appended table shows the dramatic decline in recent years in deaths from respiratory (pulmonary) tuberculosis, compared with the marked increase in those from cancer of the lung, which in 1954 numbered 87 in males and 9 in females. The former figure is now more than three times the

mortality from pulmonary tuberculosis and has increased by more than 200% in the past seven years, i.e. from 27 in 1948 to 87 in 1954.

Year	Males		Females		Total Deaths	
	T.B.	Cancer	T.B.	Cancer	T.B.	Cancer
1948 ...	69	27	51	12	120	39
1949 ...	62	47	36	7	98	54
1950 ...	56	58	31	9	87	67
1951 ...	39	66	21	11	60	77
1952 ...	40	61	11	10	51	71
1953 ...	30	70	16	18	46	88
1954 ...	24	87	14	9	38	96

CANCER EDUCATION

The Portsmouth Cancer Education Committee was represented in June at the first meeting in London of sister Committees affiliated to the Marie Curie Memorial Foundation. Three American films were shown, and a very helpful inter-change of information took place.

Subsequently the M.C.M.F. offered, and we gratefully accepted, a grant of £50, to be used for the emergency relief of cancer patients. A small sub-committee was set up to administer this fund, which will not be spent on anything that can properly be obtained from other sources such as National Assistance.

The third Annual General Meeting, in December, was addressed by the eminent surgeon, Mr. A. Lawrence Abel, M.S., F.R.C.S., whose vigorous delivery effectively illumined a most interesting speech.

During the year, discreet distribution of leaflets was continued and, with the kind co-operation of the Factory Doctor for this area, suitable booklets were sent to the managements of the principal local factories, for the information and guidance of the nurses or attendants in charge of their first-aid room.

VENEREAL DISEASE (page 73)

The number of cases attending for the first time during the year was 377—comprising 29 cases of syphilis of all stages, 85 cases of gonorrhoea and 383 (of which one-third required no treatment) other conditions. This is an overall decrease on last year. The incidence of gonorrhoea is practically stationary, but there were 10 fewer cases of syphilis and 70 fewer other conditions.

The liaison between the Medical Officer in Charge of the Department, the Services and the Health Department remains excellent. One of the health visitors still acts as almoner and does good work in tracing contacts and encouraging the attendance of 'defaulters', etc.

PARASITIC INFESTATION (pages 74–76)

(a) SCABIES

The incidence of scabies in the community has still remained fairly high, 64 cases (the same number as in 1950) and 21 contacts being treated during the year, compared with 87 cases and 82 contacts in 1953; in 1947, however, cases numbered 656 and contacts 521—an aftermath of the war years.

(b) PEDICULOSIS (Lice)

Cases of pediculosis showed a further decline, 124 families and 480 individuals—of whom 279 were actually infested—being dealt with, compared with 175 families and 675 persons in 1953.

PUBLIC BATHS

(pages 77–80)

The financial year 1954–55 was the most favourable ever experienced in the history of the Park Road Baths, total patronage having attained the record figure of 135,720—an increase of 15,784 on the previous year, and the revenue of £5,190 11s. 7d. being £466 1s. 6d. more. These excellent results must be attributed in the main to the enthusiasm and enterprise of the new Baths Superintendent and his staff, and fully justify the modest expenditure incurred by your Committee in 1949 by the installation of modern filtration and chlorination plant for the swimming pool.

As will be evident from the appended table, the number of persons, other than school children under instruction, using the swimming pool is now more than two-and-a-half times the figure prevailing before the filtration plant was installed and the total receipts have increased to a similar degree.

<i>Year ended 31st March</i>	<i>Number attending</i>		<i>Total</i>	
	<i>Swimming Pool</i>	<i>Slipper Baths</i>	<i>Attendances</i>	<i>Receipts</i>
1949	19,920	43,259	74,928	£2,038
1950	33,643	38,290	95,252	£3,543
1951	28,091	34,141	88,921	£3,637
1952	34,547	36,457	101,488	£4,057
1953	34,574	35,445	97,740	£3,895
1954	36,832	36,753	119,936	£4,730
1955	55,896	38,390	135,720	£5,190

The Anglesea Road Baths were under construction in 1939 when war broke out; work was stopped in the following year and the building subsequently suffered severe bomb damage as well as considerable deterioration from exposure to the weather over a period of fifteen years. After the refusal of several applications, the Ministry of Housing and Local Government in December, 1953, gave approval in principle to the completion of the building.

In the spring of 1954 the Health and Housing Committee approved a scheme of reconstruction recommended by the Baths Sub-Committee, and instructed the City Architect to prepare sketch plans which are now complete, and estimates are awaited. The plans will include a number of improvements to bring the scheme up to modern requirements and are principally extending the swimming bath and hall, providing facilities for international swimming and diving events. They will also provide for slipper and shower baths, together with immersion pool for remedial exercises; these now supersede and occupy the part of the building originally allocated to medicated baths. Allowing an appropriate period for Ministry approval of the final scheme and estimate, preparation of working drawings, etc., it is expected that it will be possible to obtain tenders for the rebuilding by early 1956. Settlement of the war damage claim will proceed concurrently.

INSPECTION AND SUPERVISION OF FOOD

(pages 81–85 and 90–93)

The total number of samples of food and drugs was 1,945, an increase of 110 when compared with the number taken in 1953. Of this number 140 or 7·2% were found to be adulterated or incorrectly labelled, compared with 5·2% for the previous year.

All the adulterated samples were dealt with by cautions or referred to the appropriate Ministry.

FOOD AND DRINK INFECTIONS

The re-appearance of typhoid fever in the City in 1954 was fortunately limited to two cases—both of the same bacteriophage type, and the infected persons had similar histories of diet and movement. The patients were not known to each other, but both had travelled outside the City and had refreshments at various places en route. Similarly, both had eaten cockles at significant dates. Examination in detail of the patients' movements for a month previous to onset failed to make the trails cross, and a very tenuous suspicion fell on the cockles, which came from various sources. Shellfish from the suspect areas were put up for bacteriological examination and yielded nothing. Samples of well water, meat rolls, sandwiches, and bottled shellfish from identical sources as those consumed by the patients were considered as possible vehicles of infection and investigated by the authorities in whose area these originated. The scope of this enquiry also included food handlers and persons having contact with the two cases, but no common factor was evolved. There were no secondary infections.

Better results favoured the investigation of the first paratyphoid B. infection during the year. The patient, a child aged 2 years, had been in the care of a baby-sitter who, after persistent questioning, admitted to some intestinal upset, subsequent to washing the patient's soiled napkins. Specimens from the baby-sitter on culture in the laboratory yielded *B. paratyphosus* and, as her history of stomach disorder was somewhat hazy, it was problematical whether the child infected the adult or vice versa. Pursuing the contacts of the second case it was found that the baby-sitter's daughter was engaged in the bakery of a local pastrycook where she carried out the process of filling cream buns and decorating pastries—the ideal work for spreading infection. This operator was found to be a symptomless excretor. Needless to say she was excluded from work before the bacteriologist's report had proved this action to be essential. Investigation of the contacts of this third case gave a negative result. Thus, although this minor outbreak was confined to a block of Council flats, all the requisites for a major epidemic involving the whole City and its environs existed. Hardship to the adults found to be harbouring the causal organism was created by their having to enter hospital for treatment, and, although certificates as provided by the Act were given for the daughter's exclusion from work, the family income deteriorated to such an extent that arrears of rent accrued. The appropriate Committee of the Council sympathetically considered the case and waived this deficit. Since the mother and daughter were discharged from hospital they have been under surveillance of the Department and, as it was not practicable to say that the risk of spreading infection was over, the daughter was proscribed from the bakery and has since been employed in other than food concerns. The possibility of "missed cases" was considered and the City's private practitioners circularised but, although a few alarms and excursions arose, none was proved to be paratyphoid B.

Thirty-six cases of *salmonella typhi* murium and one of *salmonella cubana* were recorded, a large percentage of these being cases discovered by bacteriological examination of specimens from contacts. No large-scale outbreak of this form of food poisoning occurred, the incidence being confined to small family groups which most disconcertingly invariably numbered amongst its members a symptomless excretor. Many food specimens were examined for pathogens but, as in most cases the samples were not residual from the suspected food, no causative organisms were identified.

In July, 42 cases of food poisoning occurred in an outbreak at St. Mary's House, the patients being of either sex and chronic aged sick. One male inmate died, but the others made a rapid recovery. Stools and vomit from

the affected persons yielded a heat-resistant strain of *Cl. welchii*, a recognised cause of food poisoning, which suggested that the origin of the outbreak lay in a meat dish, and illustrates the folly of the pernicious practice of "warming-up" food before serving. The meat was cut up and cooked one day, stored unrefrigerated until the following day, when it was minced and reheated. Unfortunately, only a minute portion of the original meat remained and it was bacteriologically negative, but the incrimination of this article of the inmates' diet was complete when it was revealed that a cleaner, who ate only of the suspect meat, was also taken ill. A check of conditions at the meat supplier's establishment absolved them from any apparent connection with the incident. A lack of co-operation on the part of the domestic staff at the House prevented specimens being available for examination, and it was impossible to check whether any carriers of this organism existed.

Sonné dysentery, now endemic, was limited to sporadic family infections, there being no large scale outbreak.

SANITARY CIRCUMSTANCES

(pages 86-98)

WATER SUPPLY

There is nothing new to be recorded regarding the water supply, which continues to be of excellent character both in purity and quantity. The results of the Public Analyst's chemical and bacteriological examinations are referred to on page 116.

HOUSING

The City Architect has supplied the following information regarding housing progress during the year:—

- 1,990 houses were completed during 1954
(174 private enterprise, 14 housing societies, etc.).
- 2,281 were under construction
(121 private enterprise, 12 housing societies, etc.).
- 389 were under contract, but building not started
(private enterprise 59).

These figures include houses outside the Local Authority's boundary.

DISPOSAL OF THE DEAD

MORTUARY ACCOMMODATION

The number of bodies received into Park Road mortuary during the year was 359, compared with 372 in 1953. These were brought to the mortuary:— from fatal accidents—88 (included in (c) below); from private residences, hospitals, etc. (a) for post-mortem examination—174, (b) for post-mortem and subsequent inquests—33, and (c) for inquest only—144. In addition, eight bodies were brought in on whom neither post-mortem nor inquest was held.

In October, 1949, consideration was given by the Health and Housing Committee to proposals submitted by the Regional Hospital Board to extend and modernise the existing mortuary at Saint Mary's Hospital, additional accommodation and refrigeration being provided. The capital cost of this central mortuary, which would afford greatly improved facilities for pathological investigations, was estimated to be £5,000, and it was suggested that the Council should contribute half of this sum, together with an annual contribution not exceeding the present expenditure towards the maintenance

of the existing mortuary at Park Road as a viewing room for the Coroner's Court. Unfortunately, the Regional Hospital Board subsequently found it necessary, owing to the need for economy in capital expenditure, to defer this proposal indefinitely. In 1953, however, the Western Area Committee of the Regional Hospital Board resolved that the scheme should be included in the capital programme for 1955/56, and that in the meantime certain minor improvements to the mortuary, which would form an integral part of the permanent scheme, should be carried out, including the provision of a 12-body refrigerator and new post-mortem tables at an estimated cost of £635, of which one half would be borne by the Corporation. During the year under review a further meeting was held with representatives of the Regional Board to discuss the provision of improved mortuary facilities at Saint Mary's Hospital, towards which the Council had already agreed in principle to pay 50% of the cost which had meantime increased to £11,992. It is now hoped that this work may commence in the summer of 1955.

CREMATORIUM

The need for a crematorium to serve an area of this size and to reduce the demand for land for cemetery purposes has been mentioned in many previous Reports. A site at Cornaway Lane, Fareham, of five acres has now been approved by the Minister of Housing and Local Government, and has been acquired on behalf of the Joint Committee of the authorities concerned—Fareham, Havant, Gosport and Portsmouth. Plans have been submitted to the Minister who has made certain stipulations which require their amendment. The final plans will accordingly be submitted to the Joint Crematorium Committee in the near future.

ACKNOWLEDGMENTS

I am again greatly indebted to the Chairman and Members of the Health Services Committee and of the Health and Housing Committee for their interest and encouragement, and I would acknowledge with gratitude the helpful co-operation of my medical colleagues and the various voluntary organisations in the City, also the assistance freely given by the Town Clerk and the chief officials of other Departments. Particular thanks are due to the Physician Superintendent of the Infectious Diseases Hospital for his assistance with epidemiological investigations, and to the Director of the Public Health Laboratory, Portsmouth, for his expert help in connection with enquiries into cases of infectious disease.

In conclusion, I would express my appreciation of the willing service given by the staff of the Health Department, who have responded without hesitation to the many demands made upon them. Special thanks are again due for their valuable assistance to my Deputy (Dr. Woodrow), to the Chief Sanitary Inspector (Mr. Appleton) and to my Administrative Assistant (Mr. Woodcock).

I have the honour to be, my Lord Mayor, Ladies and Gentlemen,

Your obedient servant,

T. E. ROBERTS.

June, 1955.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH

STATISTICAL SUMMARIES FOR 1954

Total Population (estimated by the Registrar General) ... 243,600

GENERAL STATISTICS

Area in acres (land and inland water) ... 9,249
 Population (Census 1951) ... 233,545
 Number of houses (including pre-fabricated bungalows) ... 55,149
 Number of flats ... 6,093
 Rateable value (31st March, 1954) ... £1,926,276
 Nett product of a penny rate (year ended 31st March, 1955) £7,805
 Total rainfall ... 33·13 inches

EXTRACTS FROM VITAL STATISTICS

		<u>Total</u>	<u>Male</u>	<u>Female</u>	
LIVE BIRTHS:					
Legitimate	...	3,494	1,820	1,674	Rate per 1,000 population <u>15·23</u>
Illegitimate	...	217	113	104	
Total	...	<u>3,711</u>	<u>1,933</u>	<u>1,778</u>	

STILLBIRTHS:					
Legitimate	...	92	45	47	Rate per 1,000 total births <u>24·96</u>
Illegitimate	...	3	1	2	
Total	...	<u>95</u>	<u>46</u>	<u>49</u>	

DEATHS	...	2,622	1,401	1,221	Rate per 1,000 population <u>10·76</u>
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Deaths from:

(a) Complications of pregnancy and delivery	4
(b) Other complications of the puerperium	1

Total	...	<u>5</u>
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Maternal mortality rate per 1,000 total births	1·31
--	-----	-----	-----	------

Death rate of infants under one year of age:

All infants per 1,000 live births (88)	...	...	...	23·71
Legitimate infants per 1,000 legitimate live births (80)	...	...	...	22·90
Illegitimate infants per 1,000 illegitimate live births (8)	...	...	...	36·87

PROPORTION OF DEATHS FROM PRINCIPAL DISEASES

TOTAL — 2,622

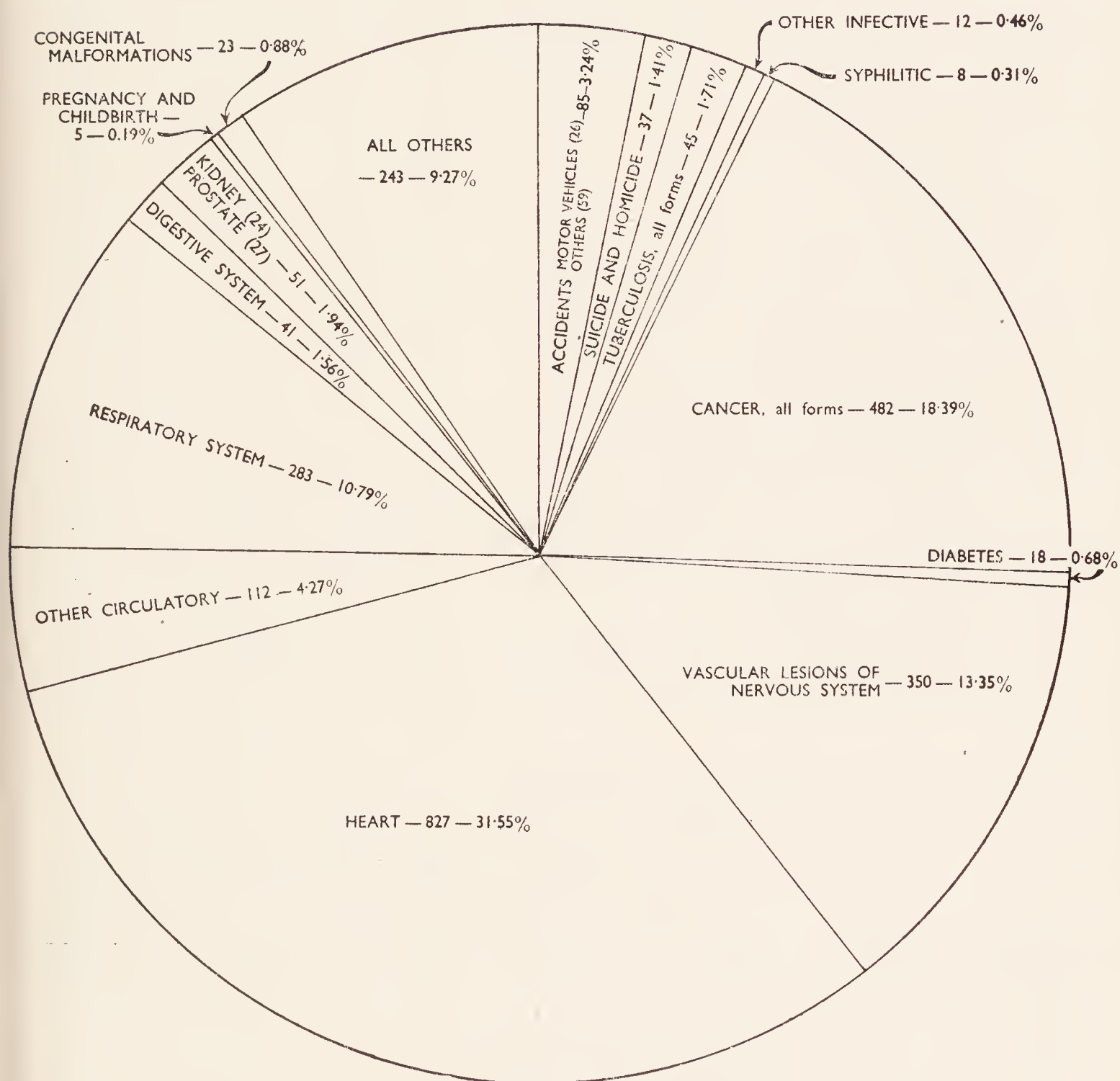


TABLE I
COMPARISON WITH PREVIOUS YEAR (1953)

	1954 Population 243,600		1953 Population 245,800	
	Number	Rate per 1,000 living	Number	Rate per 1,000 living
Births	3,711	15·23	3,739	15·21
Deaths	2,622	10·76	2,850	11·59
„ Principal Zymotic Diseases	7	0·03	10	0·04
„ Smallpox	—	—	—	—
„ Measles	—	—	1	0·00
„ Scarlet Fever	—	—	—	—
„ Diphtheria	—	—	—	—
„ Whooping Cough	3	0·01	3	0·01
„ Fever (Typhoid and Para-Typhoid)	—	—	—	—
„ Enteritis and Diarrhoea (under 2)	4	0·02	6	0·02
„ Pulmonary Tuberculosis	38	0·156	46	0·19
„ Other forms of Tuberculosis	7	0·03	6	0·02
„ Cancer (including Leukaemia)	482	1·98	483	1·97
„ Influenza	4	0·02	56	0·23

	Number	Rate per 1,000 live births	Number	Rate per 1,000 live births
Deaths under 1 year of age ...	88	23·71	89	23·80

	Number	Rate per 1,000 total births	Number	Rate per 1,000 total births
Deaths—Maternal:				
Sepsis	—	—	1	0·26
Other Causes	5	1·31	1	0·26
Total	5	1·31	2	0·52

TABLE II
TABLE SHOWING BIRTH-RATE, DEATH-RATES AND POPULATION
FOR YEAR 1954 AND THE TEN PRECEDING YEARS

Year	Birth-rate per 1,000 population	Death-rate per 1,000 population	Death-rate from zymotic diseases per 1,000 population	Deaths of children under 1 year—percen- tage of total deaths	Deaths of children under 1 year—per 1,000 live births	Population (R.G.'s estimate)
1954	15.23	10.76	0.03	3.36	23.71	243,600*
1953	15.21	11.59	0.04	3.12	23.80	245,800*
1952	15.43	10.77	0.04	3.33	23.24	242,600*
1951	15.05	11.87	0.06	3.76	29.64	244,400*
1950	15.22	10.92	0.05	4.16	29.84	240,020*
1949	19.06	12.05	0.07	3.80	24.04	218,250
1948	21.06	11.01	0.06	4.45	23.28	216,200
1947	24.29	12.98	0.12	6.25	33.40	212,020
1946	23.69	12.13	0.07	6.65	34.05	204,540
1945	23.40	13.80	0.17	7.23	42.67	179,240
1944	23.53	15.23	0.17	6.95	44.98	155,860
Average for 10 yrs. 1944-53	19.59	12.24	0.09	4.97	30.89	—

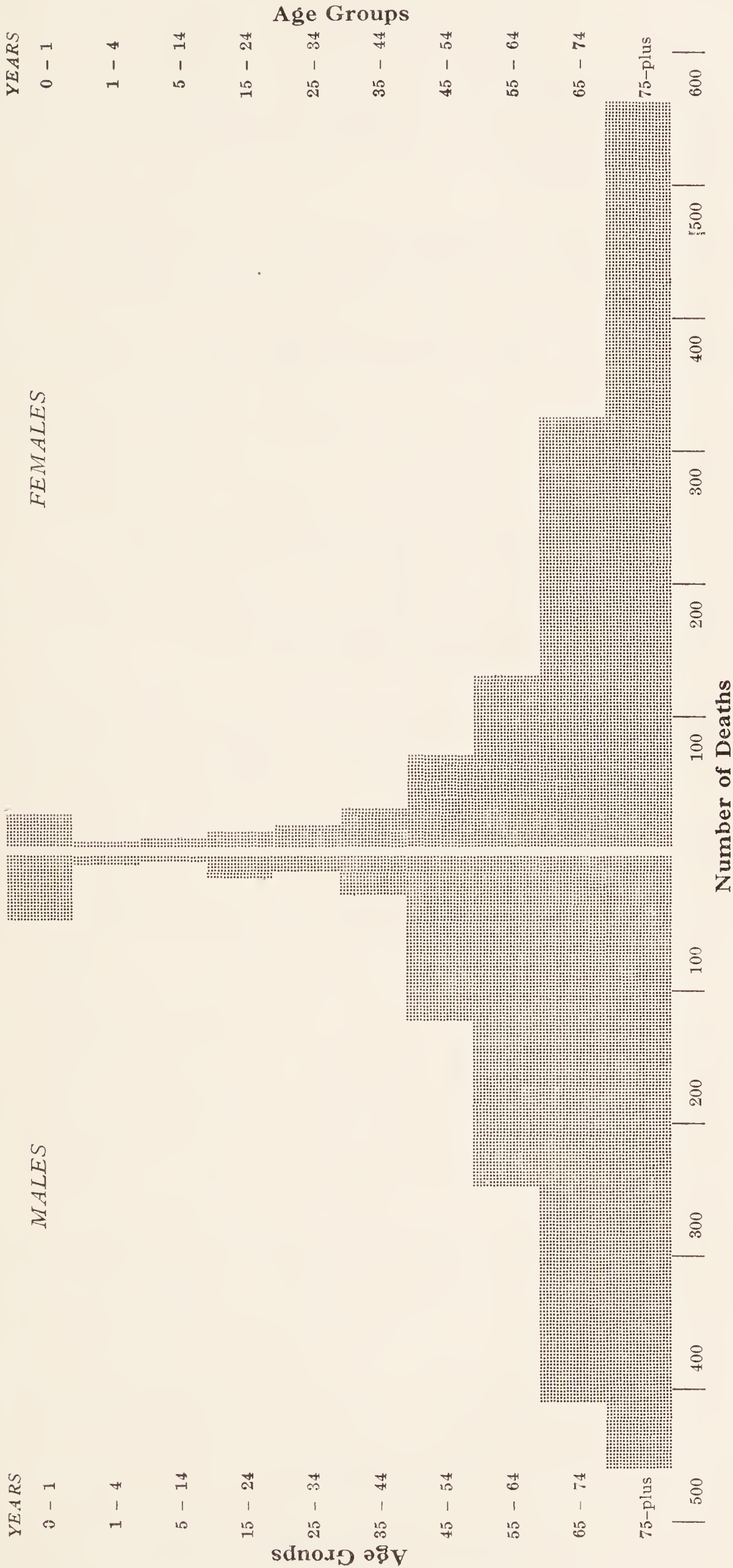
(The most favourable figures in the statistics are shown in heavy type) * Total population.

TABLE III — TABLE SHOWING POPULATION, BIRTH-RATE, DEATH-RATE, ZYMOTIC DEATH-RATES, INFANT AND MATERNAL MORTALITY RATES OF THE 20 LARGE TOWNS OF ENGLAND AND WALES FOR 1954

Name of Authority	Popu- lation (Total)	Adjusted Rates per 1,000 population		Death-rates per 1,000 population from:												Maternal Mortality Rate per 1,000 total births
		Birth	Death	Meningococcal Infections	Whooping Cough	Influenza	Measles	Acute polio- myelitis and encephalitis	Diarrhoea (under 2 years)	Tuberculosis- Respiratory	Tuberculosis- Non-respiratory	Cancer (all forms including Leukaemia and Aleukaemia)	Infantile Mortality Rate (per 1,000 live births)	Neo-natal Mortality Rate (per 1,000 live births)	Still-birth Rate (per 1,000 total births)	
CROYDON ...	249,800	14.2	9.5	0.00	—	0.02	—	0.00	0.00	0.112	0.016	1.94	19.0	14.0	22.2	0.82
SOUTHAMPTON ...	194,300*	16.36	9.89	0.011	0.005	0.016	—	—	0.016	0.266	0.011	2.022	23.59	16.26	23.05	0.31
COVENTRY ...	264,600	14.8	10.4	—	—	0.019	—	0.004	0.012	0.15	0.015	1.5	30.4	22.0	29.9	1.2
PORTSMOUTH ...	243,600	15.53	10.54	0.01	0.01	0.02	—	—	0.02	0.156	0.03	1.98	23.71	14.01	24.96	1.31†
PLYMOUTH ...	217,500	16.79	11.01	0.00	—	0.00	—	0.00	0.04	0.14	0.01	1.83	28.21	19.83	24.52	1.09
BRISTOL ...	444,900	14.89	11.15	0.00	—	0.04	—	0.00	0.00	0.151	0.016	2.084	20.77	15.84	23.35	0.58
LEICESTER ...	287,300	15.21	11.51	0.014	—	0.010	—	0.0035	0.01	0.237	0.028	2.064	27.19	17.45	23.24	0.44
NOTTINGHAM ...	311,500	15.24	11.56	0.01	—	0.03	0.00	—	0.00	0.23	0.01	1.90	24.35	14.78	19.79	0.59
BIRMINGHAM ...	1,117,700	15.378	12.13	0.00	0.01	0.03	—	0.00	0.01	0.20	0.01	2.05	24.23	16.79	21.62	0.803
LEEDS ...	507,200	14.7	12.2	0.005	—	0.03	—	—	0.02	0.16	0.01	2.03	26.0	17.8	24.2	0.64
SHEFFIELD ...	503,400	13.50	12.26	0.01	0.01	0.03	—	0.00	0.02	0.179	0.028	2.22	23.88	15.87	24.16	0.43
KINGSTON-U-HULL ...	300,000	17.6	12.3	0.01	0.00	0.07	—	0.01	0.02	0.25	0.02	1.98	33.9	19.3	27.6	0.71
CARDIFF ...	248,000	17.02	12.39	0.004	—	0.032	—	—	0.048	0.30	0.02	2.06	34.06	21.82	25.39	1.30
SUNDERLAND ...	181,800	18.5	12.4	0.02	—	0.02	—	0.01	0.02	0.25	0.02	2.06	29.4	19.0	21.9	—
NEWCASTLE-U-TYNE	286,500	16.10	12.40	—	0.007	0.063	—	—	0.007	0.27	0.03	1.93	25.53	18.32	25.48	0.20
STOKE-ON-TRENT ...	274,100	14.7	13.6	0.018	—	0.044	0.0146	—	0.219	0.27	0.022	1.966	33.0	23.87	31.5	1.59
LIVERPOOL ...	786,100	18.42	13.65	0.01	0.006	0.019	0.0038	0.000	0.01	0.295	0.015	2.01	30.81	20.71	24.78	0.49
MANCHESTER ...	699,000	16.10	13.78	0.00	0.01	0.05	0.00	0.00	0.02	0.27	0.03	2.24	29.47	20.01	31.80	0.49
SALFORD ...	171,500	15.88	13.94	—	0.006	0.035	0.012	—	—	0.227	0.012	2.397	30.35	19.53	24.83	1.36
BRADFORD ...	286,500	16.4	14.34	—	—	0.12	—	—	0.02	0.11	0.02	2.30	31.4	20.0	24.9	0.42

Notes.—*In calculating these rates a population figure of 187,950 is used, which is a working population taking into account the boundary change on 1st April 1954

TABLE IV — ANALYSIS OF DEATHS BY AGE GROUPS



METEOROLOGY — 1954

BAROMETER. The mean barometric pressure (corrected to sea level) for the year was 29·900 inches (30·035). The highest observed reading was 30·563 on 16th November (30·752), and the lowest 28·420 on 9th December (28·468).

TEMPERATURES. The mean temperature in the shade was 51·0° (52·0°).

Maximum. The mean maximum temperature in the shade was 55·9° (57·5°), the highest being 75° on 4th June (80°).

Minimum. The mean minimum temperature was 46·0° (46·4°), the lowest being 17° on 1st and 6th February (25°).

Minimum on Grass. The mean minimum temperature on the grass was 40·5° (41·2°), the lowest being 13° on 1st February (15°).

Earth Temperature. The mean temperature at one foot below the ground was 52·4° (52·9°), and at four feet 52·8° (53·3°).

Frosts. The minimum temperature in the shade, four feet above the ground, fell to and below freezing point on 26 days (33), and there were 59 (73) ground frosts during the year.

SUNSHINE. 1,553 hours 48 minutes (1,791 hours 30 minutes) of sunshine were registered by the Campbell-Stokes recorder. The greatest amount on one day was 13 hours 54 minutes on 24th June (14 hours 30 minutes).

RAINFALL. The total rainfall was 33·13 inches (19·71). The greatest fall in twenty-four hours was 1·70 inches on 8th December (0·97).

HUMIDITY. The mean humidity of the air (saturation 100) was 81 (81).

The following phenomena were recorded:—

HAIL on nine occasions (5).

SNOW or SLEET on eleven occasions (5).

THUNDER on eleven occasions (1).

FOGS. Nineteen (56).

GALES. Twenty-nine—16 fresh, 13 moderate (nine—3 fresh, 6 moderate).

AVERAGES FOR THE PAST TEN YEARS (1945–54)

Rainfall	Sunshine	Mean
27·59 inches	1,778·4 hours	51·9°

(Figures in brackets refer to 1953)

TABLE V
MONTHLY METEOROLOGICAL SUMMARY FOR THE YEAR 1954

Month	Mean Pressure (ins.)	Temperature — Degrees F.					Sunshine		Rainfall			Relative Humidity (Saturation 100)	
		Mean	Absolute		Mean		Mean Daily Range	Total No. of Hours	Days of 0.5 hrs. or more	Total m.m.	Total ins.		Days of 0.01 ins. or more
			Max.	Min.	Max.	Min.							
January	30.088	38.5	53	21	8.7	80 hrs. 48 mins.	19	54.9	2.16	9	83		
February	29.773	38.8	50	17	8.8	68 " 12 "	16	62.9	2.48	17	88		
March	29.698	44.9	56	26	9.6	120 " 42 "	24	80.8	3.18	15	84		
April	30.167	47.2	61	35	14.3	230 " 24 "	28	7.9	0.31	3	69		
May	29.917	53.8	70	41	12.2	178 " 18 "	27	58.7	2.31	16	72		
June	29.917	57.8	75	47	10.4	170 " 42 "	24	69.6	2.74	13	80		
July	29.881	59.9	72	47	9.7	170 " 42 "	26	86.5	3.41	11	78		
August	29.829	60.4	73	50	10.1	165 " 12 "	28	78.7	3.10	14	82		
September	29.867	58.4	72	44	9.6	173 " 6 "	26	60.6	2.39	19	81		
October	29.926	56.5	66	37	8.1	88 " 54 "	24	54.6	2.15	16	84		
November	29.829	48.9	60	46	9.1	59 " 12 "	16	139.2	5.48	20	84		
December	29.894	46.8	59	30	8.4	47 " 36 "	15	86.9	3.42	13	86		
TOTAL	—	—	—	—	—	1,553 " 48 "	273	841.3	33.13	166	—		
MEAN	29.900	51.0	—	—	9.9	129 " 29 "	23	70.1	2.76	14	81		

TABLE VI
MONTHLY ANALYSIS OF WIND DIRECTIONS—1954
(recorded at 9 hours G.M.T.)

1954	N	NE	E	SE	S	SW	W	NW	Calm	Totals
January ...	5	4	4	2	1	5	5	4	1	31
February ...	1	6	2	2	2	12	1	1	1	28
March ...	1	5	6	2	2	8	3	3	1	31
April ...	2	12	2	—	2	5	4	2	1	30
May ...	3	4	2	1	2	6	6	4	3	31
June ...	—	3	1	1	2	13	6	4	—	30
July ...	—	1	—	—	1	16	10	3	—	31
August ...	3	—	1	2	3	12	5	2	3	31
September ...	—	2	2	—	1	13	8	2	2	30
October ...	1	1	2	1	1	17	6	2	—	31
November ...	1	3	2	2	6	7	5	3	1	30
December ...	—	3	—	1	1	12	7	6	1	31
TOTALS ...	17	44	24	14	24	126	66	36	14	365
% (nearest whole Nos.)	5	12	7	4	7	33	18	10	4	100

MATERNITY AND CHILD WELFARE

*By the Senior Assistant Medical Officer of Health
(Maternity and Child Welfare)*

CARE OF MOTHERS AND YOUNG CHILDREN**MATERNAL MORTALITY**

The maternal mortality rate showed an increase from 0·52 per thousand total births in 1953 to 1·31. This represents a total of five deaths, the causes of which were as follows:—

- (a) Pulmonary embolus. Caesarian section.
- (b) Liquor amnii embolus. Natural causes P.M.
- (c) Pulmonary infarction. Patent inter-ventricular septum.
Pregnant—delivered 7 days before death. P.M.
- (d) Surgical shock. Post partum haemorrhage. Acute inversion of uterus.
- (e) Cerebral thrombosis (recurrent). Hypertension. Toxaemia of pregnancy.

The number of maternal deaths which occurred during pregnancy or immediately after confinement in 1954 was four, giving a rate of 1·05 per thousand total births, but the Registrar General has insisted that one—(e) above—concerning a confinement which took place no less than 30 years ago be included under this heading. Most appropriately it comes under the Registrar General's category of "delayed deaths." It is felt that the inclusion of this death as a maternal one in 1954 does not give an accurate picture, as the present day practice of obstetrics and the maternity services provided in 1954 are in no way comparable with those of 30 years ago.

It has not been possible to obtain a report of the confinement in death (e) but the deaths (a) (b) (c) and (d) have all been carefully investigated, a scrutiny of the reports showing that each mother received continuous and adequate supervision during pregnancy and labour. It is difficult to see, therefore, how these deaths could have been avoided.

INFANT MORTALITY

The infant mortality rate for 1954 has remained at a low level—23·71, compared with 23·80 in 1953; the actual number of infant deaths was 88 (89). An analysis of these figures (page 44) shows that in 1954 the deaths occurring in the first four weeks of life numbered 52, and those from four weeks to one year 36 (comparable figures in 1953 were 56 and 33), making a neo-natal death rate of 14·01 in 1954, compared with 14·98.

PREMATURE BIRTHS

Special visits were made by midwives and health visitors to all premature babies. A premature baby outfit, including cot equipment, etc., is supplied by the local authority and is available for nursing premature babies on the district.

Wherever it is possible arrangements are made for premature births to take place in hospital. During 1954, 145 premature births took place in Saint Mary's Hospital.

The total number of premature births reported during 1954 occurring at home and in private nursing homes was 106 (109). Of the 59 (62) born and nursed at home, no baby died during the first twenty-four hours and 58 (59) were still surviving at the end of the month; 25 (18) babies born at home

were transferred to hospital. Of the 21 (23) babies born and nursed in nursing homes, no baby died during the first twenty-four hours and 21 (23) were still surviving at the end of the month. One (6) baby born in a nursing home was transferred to hospital.

OPHTHALMIA NEONATORUM

During the year 3 (4) cases of ophthalmia neonatorum were notified. There was no resultant impairment of vision in any of these cases.

ATTENDANCES AT CLINICS

There was a very slight increase in the number of new patients attending the municipal ante-natal clinics in 1954—1,737, compared with 1,714 in 1953. During the year patients made a total of 12,706 attendances, compared with 13,017. Co-operation between the general practitioners and the staff of the ante-natal clinics is most satisfactory.

The number of patients attending the post-natal clinics for the first time decreased slightly to 299, compared with 325 in 1953. Patients made a total of 393 attendances, compared with 523 in the previous year.

The child welfare clinics continue to be well attended, as will be seen from the table on page 41. There was a decrease in the total attendances made by the children—56,843, compared with 62,460 in 1953.

HEALTH EDUCATION

Mothercraft talks continued to be given weekly by health visitors and midwives at the child welfare clinic at Trafalgar Place, Clive Road, Fratton, and are well attended. Relaxation classes were held weekly after the mothercraft talks and are increasingly popular.

MOTHERS' CLUBS

Two mothers' clubs continued to meet as previously, one at Portsea and one at Cosham child welfare centres. The mothers seem to appreciate these social and educational afternoons and the most popular are those during which educational film strips are shown, these being followed by animated discussion.

NATIONAL WELFARE FOODS

In April, 1954, local authorities were informed by the Minister of Health that, with the agreement of the Association of Municipal Corporations, the local distribution of national welfare foods, i.e. national dried milk, orange juice, cod liver oil and vitamin A and D tablets, would be undertaken by local health authorities as part of their duties under the National Health Service Act when Ministry of Food offices closed at the end of June. Previously, when this function was the responsibility of the Ministry of Food, there had been three channels of distribution, namely, the Ministry of Food offices (from which the bulk of the issues had been made), the Child Welfare Centres, and the Women's Voluntary Services centres. With the closing of the Ministry of Food premises, arrangements had to be made for the business transacted there to be absorbed into the other centres, and, with the fullest co-operation of the W.V.S., this was achieved by making greater use of their facilities and by increasing the number of Child Welfare Centre sessions in some cases. There was the difficulty, however, of finding an alternative to Elm Grove food office, there being no other suitable centre in this busy area, and a shop at 58, Elm Grove was rented by the Council for

this purpose; this was staffed by W.V.S. helpers and open every day of the week, and it has turned out to be the most patronised of all the centres in the City. At the end of the year there were 15 distribution centres in operation.

As was to be expected, the change-over was not accomplished without some problems but, fortunately, these turned out to be only of a minor nature and in a very short time the new organisation was working smoothly and, judging from the absence of complaints, to the satisfaction of the public. In October a new system of documentation was introduced by the Ministry of Health, the operative Government department being the Ministry of Pensions and National Insurance, and this generally proved advantageous both for the beneficiaries and the staff engaged in the distribution of the foods.

The issues during the period from 28th June to the end of the year were:—

National Dried Milk—63,253 tins	(weekly average of 2,343)
Cod Liver Oil —11,814 bottles	(„ „ „ 438)
A and D Tablets — 4,850 packets	(„ „ „ 180)
Orange Juice —62,095 bottles	(„ „ „ 2,300)

NURSERIES

During the year the total number of children under five years of age admitted to the day nurseries was 172 (183). Owing to a reduced number of places being occupied the complement was reduced to 75, with appropriate adjustments amongst the staff.

Medical officers of the Health Department regularly carried out medical examinations at Annesley House residential nursery.

DENTAL TREATMENT

Dental care of expectant and nursing mothers and of young children continues to be carried out mainly by the hospital authorities. During the year 389 cases were referred from the local authority's clinics, compared with 516 cases in 1953.

MIDWIVES SERVICE

The total number of domiciliary midwives who sent in their notification to practise during 1954 was 27; of this number 24 belonged to the Portsmouth Municipal Service, and three were district midwives who practised privately. The total number of cases delivered by municipal midwives was 1,599 (1,578) and by independent midwives 12 (18); the former figure represents an average of 88·8 (85·7) cases per midwife per annum.

Close liaison is maintained between the maternity section of the Health Department and the hospital maternity booking office. The Supervisor of Midwives continues to make investigations into home conditions in cases where admission to hospital is sought on grounds of unsuitable accommodation at home.

The domiciliary service of midwives continues to undertake the district training of pupil midwives for their Part II examination of the Central Midwives Board. During the year 32 pupils entered for the examination, 25 being successful at their first attempt.

ANALGESIA IN CHILDBIRTH

There was a slight decrease in the percentage of cases to whom gas and air analgesia was administered on the district in 1954—86·9, compared with 87·5 in the previous year.

The administration of pethidine by the midwives continues to be most successful in bringing relief to mothers in labour.

The following is an analysis of cases:—

Gas and air and pethidine used	855	(847)
Gas and air alone used	534	(533)
Pethidine alone used	17	(32)

The remaining cases—193—were those in which a different form of analgesia was used, those where for medical reasons it was contra-indicated, cases in which the delivery was too rapid, and where the mothers preferred to have no analgesia.

HOME HELP SERVICE

This service continues to work satisfactorily; all cases receiving assistance are carefully selected and supervised.

To further the more efficient care of old people and to reduce home helps' travelling time a scheme was introduced, whereby a home help was given the care of approximately six cases whose homes were in close proximity to one another. Four of these groups were introduced and have proved so satisfactory that it is proposed to extend this scheme whenever an appropriate group of cases is receiving help.

An analysis of the statistics of the Home Help Service for the year 1954 is as follows;—

Number of home helps at the end of the year	...	56
Number of maternity cases helped	... ..	115
Number of tuberculosis cases helped	... ..	28
Number of chronic sick cases helped (including aged and infirm)	... ..	420
Number of other cases of illness helped	... ..	91
Number of hours worked for maternity cases	...	5,191½
Total number of hours worked	... ..	82,794¾ (74,334¼)

HEALTH VISITING

The number of health visitors employed at the end of the year was 23 (22), of whom one was employed as full-time and five as part-time tuberculosis visitors. There were also two trained nurses engaged as full-time tuberculosis visitors.

The total number of visits paid was 62,708, compared with 58,028 in 1953. The number of visits paid to children under five years of age during 1954 was 52,310, compared with 50,031 in the previous year. 5,171 (3,172) were paid to other age groups in the family, especially the aged, and 5,227 (4,825) to tuberculosis patients. A total number of 2,567 visits was paid to the aged. This shows a great increase on the previous year's visits and represents many hours of work as each case requires much patience and tact; it is anticipated that the number of visits paid to this type of case will increase.

Each health visitor has approximately 600 families in her area.

The health visitors training course continued at Southampton University and the scheme of "assisted course" students is still proving helpful in maintaining the supply of health visitors.

MATERNITY AND CHILD WELFARE STATISTICS

CHILD WELFARE CENTRES

The number of attendances, new cases and children seen by the Medical Officers at the Child Welfare Centres functioning during the year are set out below:—

	Attendances	New Cases	Seen by the Medical Officer
Fratton (two afternoons per week) ...	8,889	621	1,205
Epworth Road (one afternoon per week) ...	8,233	385	807
Drayton (one afternoon per week) ...	3,986	166	492
Eastney (two afternoons per week) ...	12,784	696	1,253
Portsea (one afternoon per week) ...	3,996	416	730
Stamshaw (one afternoon per week) ...	7,204	357	757
Tangier Road (one afternoon per week) ...	4,382	183	438
Cosham (one afternoon per week) ...	3,040	256	589
Paulsgrove (one afternoon per week) ...	4,329	283	641
TOTALS	56,843	3,363	6,912
TOTALS for 1953	62,460	3,497	6,478

Attendances at Child Welfare Centres during the year 1954, classified according to the age of the child concerned, were as follows:—

Children from 0 to 1 year of age	...	...	43,953
„ „ 1 to 2 years of age	...	...	8,303
„ „ 2 to 5 years of age	...	...	4,587
Total ... ..	...	...	56,843
Total for 1953 ... ..	...	...	62,460

Proprietary brands of dried milk were issued from the Child Welfare Centres to expectant mothers, nursing mothers and infants, at a total cost of £3,655 (£3,972); £4,115 (£4,325) was recovered from the patients.

DAY NURSERIES

The following are the statistical details relating to the three Day Nurseries:—

	Admissions during the year	No. on Register at 31st Dec.	Awaiting admission 31st Dec.
ST. PETER'S DAY NURSERY (Complement 30)	59	36	} 7
TWYFORD AVENUE DAY NURSERY (Complement 25)	53	32	
ANGLESEA ROAD DAY NURSERY (Complement 20)	60	25	

MIDWIVES

The practice of district midwives and of those practising in nursing homes during the year was satisfactory, and the inspection of midwives' bags, books and appliances was carried out regularly.

	1954	1953
Number of midwives practising on the district and in nursing homes on December 31st	36	36
Total number of cases attended by them	2,334	2,479
Number of cases attended by municipal midwives	1,599	1,578
„ „ „ „ „ independent midwives	12	18
„ „ „ „ „ in nursing homes	723	883
„ „ „ „ in which medical assistance was sought where no doctor was engaged	259	272

DOMICILIARY SERVICE OF MIDWIVES

	1954	1953
Number of municipal midwives employed in Portsmouth at 31st December	24	22
Number of cases booked	2,309	2,210
Number of patients delivered	1,599	1,578
Excluding holidays and sickness:		
Average number of cases per midwife per month	7.4	7.1
Average number of cases per midwife per annum	88.8	85.7
Average weekly number of bookings	44.4	42.5

ANTE-NATAL AND POST-NATAL CLINICS

Details of the work carried out at Ante-Natal and Post-Natal Clinics during the year are given below:—

	ANTE-NATAL				POST-NATAL			
	No. of new patients		Total attendances		No. of new patients		Total attendances	
	1954	1953	1954	1953	1954	1953	1954	1953
Fratton (A.N., 5 clinics weekly) ... (P.N., 1 clinic weekly)	1,091	1,045	8,365	8,663	240	277	284	380
Cosham (A.N., 2 clinics weekly) ... (P.N., 2 clinics monthly)	422	424	2,732	2,596	59	48	109	143
Portsea (A.N., 1 clinic weekly) ...	224	245	1,609	1,758	—	—	—	—
Saint Mary's Hospital (A.N., 7 clinics weekly) ... (P.N., 1 clinic weekly)	1,257	1,304	15,552	14,887	1,291	1,272	1,291	1,272
TOTALS ...	2,994	3,018	28,258	27,904	1,590	1,597	1,684	1,795

INSTITUTIONAL TREATMENT OF MATERNITY CASES

	Saint Mary's Hospital	Royal Naval Maternity Home
No. of maternity beds (exclusive of isolation and labour) ...	69	17
No. of patients admitted ...	2,203	237
Average duration of stay ...	12 days	14 days
No. of cases delivered by—		
(a) Midwives ...	1,580	186
(b) Doctors ...	319	18
Cases in which medical assistance was sought by midwife ...	Doctor always available	150
No. of cases notified as puerperal pyrexia ...	71	1
No. of cases of pemphigus neonatorum ...	—	—
No. of infants not entirely breast-fed while in Institution ...	430	15
No. of cases notified as ophthalmia neonatorum ...	—	—
No. of maternal deaths ...	5	—
No. of foetal deaths—		
(a) Stillborn ...	102	1
(b) Within 28 days of birth ...	52	2

HOME VISITING

The health visitors paid 62,708 (58,028) visits during the year:—

						Total Number of Visits	
						1954	1953
First visits to children ...	...	...	...	...	...	3,624	3,707
Subsequent visits to children from 0 to 1 year of age	...				...	18,082	15,919
„ „ „ 1 to 2 years of age	...				...	10,567	9,404
„ „ „ 2 to 3 years of age	...				...	8,955	8,158
„ „ „ 3 to 5 years of age	...				...	11,082	12,843
Visits to expectant mothers ...	...	...	...	...	...	988	286
Visits in respect of home helps and the aged	...				...	4,183	2,886
Visits in respect of tuberculosis patients	...	...	...	...	...	5,227	4,825

INFANT MORTALITY, 1954

DEATHS FROM STATED CAUSES AT VARIOUS AGES
UNDER ONE YEAR OF AGE

Cause of Death	Under 1 week	1 to 2 weeks	2 to 3 weeks	3 to 4 weeks	Total under 4 weeks	4 weeks and under 3 months	3 months and under 6 months	6 months and under 9 months	9 months and under 12 months	Total Deaths under 1 year
Whooping Cough ...	—	—	—	—	—	—	2	—	1	3
Herpetic Rash ...	—	—	—	—	—	1	—	—	—	1
Pneumonia ...	3	2	1	—	6	7	2	2	2	19
Gastritis, Enteritis and Diarrhoea ...	—	—	1	—	1	2	1	—	—	4
Congenital Malformations ...	5	2	—	1	8	3	3	2	2	18
Injury at Birth ...	8	—	—	—	8	—	—	—	—	8
Post-natal Asphyxia and Atelectasis	11	—	—	—	11	—	—	—	—	11
Immaturity ...	7	2	—	—	9	1	—	—	—	10
Other Causes ...	7	1	—	—	8	—	1	1	—	10
Accidents ...	—	—	—	—	—	1	1	—	1	3
Homicide ...	1	—	—	—	1	—	—	—	—	1
TOTALS ...	42	7	2	1	52	15	10	5	6	88
Previous Year (1953) ...	47	7	1	1	56	11	13	6	3	89

DENTAL TREATMENT FOR EXPECTANT AND NURSING MOTHERS AND YOUNG CHILDREN

By the Senior Dental Officer

The arrangements for the provision of dental treatment for expectant and nursing mothers and young children have remained unchanged.

Under an agreement made with the Portsmouth Group Hospital Management Committee, clinics are held for these patients in the dental department of Saint Mary's Hospital, and all forms of dental treatment are provided, including, when necessary, the supply of dentures. The facilities of the hospital's x-ray department are also available.

The staff of the School Dental Service is too small for those engaged in the service to allocate time for the examination and treatment of expectant and nursing mothers, but a number of children under five are treated by them at the Education Committee's clinics. These are mostly younger brothers and sisters of children at school and are brought to the clinic when other members of the family are attending for treatment. No provision has yet been made for the routine inspection of "Under fives."

Those children attending child welfare clinics, etc. are usually referred to Saint Mary's Hospital. These patients are entitled to free treatment, but not to free dentures under the General Dental Services, and practitioners have always given them some priority. There is no evidence to show that those wishing to have treatment by the dentist of their choice under the scheme have any difficulty in obtaining it.

SCHOOL DENTAL SERVICE

DENTAL TREATMENT PROVIDED FOR PRE-SCHOOL CHILDREN

(a) Numbers provided with Dental Care:

Examined	Needing Treatment	Treated	Made Dentally Fit
124	82	78	58

(b) Forms of Dental Treatment provided:

Extractions	General Anaesthetics	Silver Nitrate Treatment
99 teeth extracted for 72 children	13	6

SAINT MARY'S HOSPITAL DENTAL CLINIC

DENTAL TREATMENT PROVIDED FOR EXPECTANT AND NURSING MOTHERS AND PRE-SCHOOL CHILDREN

(a) Numbers provided with Dental Care:

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers...	157	117	117	117
Children under five	159	155	150	150

(b) Forms of Dental Treatment provided:

	Scalings and Gum Treatment	Fillings	Extractions	General Anaesthetics
Expectant and Nursing Mothers ...	1	4	112	110
Children under five	—	6	144	144

HOME NURSING

The Secretaries of the Portsmouth Victoria Nursing Association, Messrs. Edmonds & Co., have kindly supplied the following report for 1954:—

“The work of the Association continues to be heavy but the improved staff position has enabled all demands made upon the Home Nursing Service to be met without the strain on the staff which was causing so much concern two years ago.

An analysis of cases visited in 1954 shows that out of a total of 5,264 no less than 1,992 were patients over sixty-five years of age. These patients, usually living alone, require considerable nursing attention extended over a lengthy period of time, a fact which is amply reflected in the 50,681 visits made to such patients out of a total of 109,472. Whilst this trend is expected to continue, creating as it does serious social problems, it is encouraging to note that visits made to children have considerably decreased.

The staff continue to administer the new antibiotic drugs when prescribed by the doctors and wear the necessary protective clothing in order to conform with the Ministry of Health regulations when giving such injections.

The superintendents and staff continue to work in close liaison with all other branches of the health service with whom they are associated in carrying out their duties.

The Executive desire to record their thanks to the superintendents and nurses for the very efficient and untiring manner in which they have carried out their increased work.

The Executive also wish to thank the representatives of the Portsmouth Corporation, who have continued to offer us their help, and also the doctors and other social service workers for their willing help in giving lectures to candidates for the Queen's Roll”.

PORTSMOUTH VICTORIA NURSING ASSOCIATION

STATISTICS FOR 1954

	NURSES' HOMES				TOTAL	
	<i>Radnor House</i>		<i>Beddow House</i>			
Number of nurses employed for visiting (average) ...	19	(18)	18	(17)	37	(35)
Minimum in any one month ...	18	(15)	16	(14)	34	(29)
Maximum in any one month ...	21	(20)	20	(20)	41	(40)
Number of cases visited in 1954:						
(a) Maternity ...	6	(17)	28	(21)	34	(38)
(b) Pre-school children ...	164	(287)	122	(188)	286	(475)
(c) School children ...	132	(230)	79	(156)	211	(386)
(d) Tuberculosis ...	67	(65)	107	(33)	174	(98)
(e) Other cases ...	2,660	(2,666)	1,899	(1,950)	4,559	(4,616)
	3,029	(3,265)	2,235	(2,348)	5,264	(5,613)
Total number of visits in respect of these cases:						
(a) Maternity ...	54	(124)	277	(159)	331	(283)
(b) Pre-school children ...	788	(1,429)	1,029	(1,184)	1,817	(2,613)
(c) School children ...	653	(1,125)	590	(1,029)	1,243	(2,154)
(d) Tuberculosis ...	1,665	(2,034)	2,255	(1,212)	3,920	(3,246)
(e) Other cases ...	62,422	(54,539)	39,739	(37,238)	102,161	(91,777)
	65,582	(59,251)	43,890	(40,822)	109,472	(100,073)

VACCINATION AND IMMUNISATION

*By the Medical Officer in Charge***Vaccination**

The numbers vaccinated by medical practitioners and the Health Department were as follows:—

		1954			1953		
		<i>Primary</i>	<i>Re-Vacc.</i>	<i>Total</i>	<i>Primary</i>	<i>Re-Vacc.</i>	<i>Total</i>
Health Department	...	716	281	997	906	476	1,382
Practitioners	...	1,493	380	1,873	1,678	428	2,106
		<u>2,209</u>	<u>661</u>	<u>2,870</u>	<u>2,584</u>	<u>904</u>	<u>3,488</u>

Children born in 1954 numbered 3,711 (3,739) and, of these, 1,172 (1,321) or 31·6% (35·4%) were vaccinated in the same year.

195 (260) international certificates were completed for persons going abroad. These certificates are obtainable from the travel agencies or the Ministry of Health and, when completed by a private medical practitioner, require to be countersigned by the Medical Officer of Health.

In addition to the sessions which are held at the Vaccination and Immunisation Clinic, "F" Ward, Infectious Diseases Hospital, weekly vaccination is carried out at five of the child welfare centres. Until November three sessions weekly were held at 'F' Ward but, after the commencement of the B.C.G. campaign, the number had to be reduced to two.

Vaccine lymph continued to be obtained from the Central Public Health Laboratory, Winchester. Primary vaccination is usually performed at 3-4 months. Members of the Health Department, including doctors, health visitors, sanitary inspectors, clerks, and ambulance drivers and attendants, were again offered vaccination and the response was good.

Diphtheria Immunisation

In addition to weekly sessions held at the Immunisation and Vaccination Clinic at 'F' Ward, Infectious Diseases Hospital, sessions are also held at nine child welfare centres. Primary immunisation is usually carried out at 6 months, the vaccine used being Glaxo's combined Diphtheria F.T. (P) and Pertussis.

In addition, visits are paid to all schools and those children not already immunised with combined vaccine are immunised by two injections deep subcutaneously of A.P.T. with one month's interval between doses. The A.P.T. is issued free by the Ministry of Health. Supplementary or "Booster" doses of A.P.T. are given to the 5 year-old group and again at 9 years and 13 years.

The total number who have completed the course shows a small increase over 1953, while the "booster" doses show a very marked increase. There is also a satisfactory increase in the number of immunisations carried out by general practitioners.

The following table indicates the work done since 1943:—

<i>Year</i>	<i>Completed Course</i>	<i>"Booster" Doses</i>	<i>Cases of Diphtheria admitted to Hospital</i>	<i>Deaths from Diphtheria</i>
1943 ...	4,784	75	31	1
1944 ...	2,518	106	17	2
1945 ...	3,633	820	13	2
1946 ...	4,763	4,243	17	—
1947 ...	4,375	3,060	15	1
1948 ...	4,917	5,452	6	—
1949 ...	4,437	3,335	7	1
1950 ...	3,428	3,756	1	—
1951 ...	3,479	5,261	5	1
1952 ..	3,214	6,551	—	—
1953 ..	3,243	5,292	1 Haslar	—
1954 ..	3,499	7,169	—	—

Supplementary doses are given almost entirely in schools; co-operation given by head teachers has been good, with a few notable exceptions.

Private schools are visited on request, and during the year two large private schools which had not requested visits for six years were visited.

Practitioners are supplied with A.P.T. on request.

The proportion immunised by the various agencies (shown as a percentage of the children under 5 years of age) was:—

	1954	1953
Clinics	58·6	60·4
Schools	1·7	6·5
Nurseries	1·5	1·5
Private Practitioners	38·2	31·6

Number of children who received the complete course:—

Under five	2,912	2,605
Five to fifteen	583	632
Over fifteen	4	6
TOTALS	3,499	3,243
Supplementary doses	7,169	5,292
	10,668	8,535

Total number of children immunised since the inception of the scheme in 1935—80,384.

The percentage of children immunised was as follows:—children born during 1954 and immunised the same year—12·1%, between one and four years—73·0% and between five and fourteen—67·5%, giving an overall percentage of 64·8%. Although the percentage of children born in 1954 and immunised the same year would appear to be low, it is in fact quite favourable, as immunisation cannot be commenced until a child has reached 6 months, the immunisation taking another two months to complete.

REACTIONS

As in previous years those reactions which are brought to our notice have been recorded and classified as mild, moderate or severe. The great majority fall into the mild group, as shown in the following table.

	Mild	Moderate	Severe	Total
First diphtheria ...	—	—	—	—
First combined ...	2	—	—	2
Second diphtheria ...	—	—	—	—
Second combined ...	—	—	—	—
Third combined ...	—	—	—	—
Supplementary ...	60	8	3	71
	<u>62</u>	<u>8</u>	<u>3</u>	<u>73</u>

It cannot be claimed that the above table presents the whole picture, though it is fair to assume that reactions not brought to the notice of the Department are only mild ones.

POLIOMYELITIS AND IMMUNISATION

None of the three poliomyelitis cases admitted to the Infectious Diseases Hospital from the City had been immunised during the previous six months.

Whooping Cough (Pertussis) Immunisation

Immunisation is carried out with combined diphtheria-pertussis vaccine in the majority of cases, though pertussis vaccine is available for cases in which for some reason the child has already been immunised against diphtheria alone.

The total number of cases of whooping cough in those previously immunised is not available but, from the numbers which are known to have occurred, it appears that immunisation is definitely worth-while. Such cases as do occur are usually mild.

STATISTICS RELATING TO PERTUSSIS IMMUNISATION

	1954	1953
First doses ...	2,276	1,762
Second doses ...	2,134	1,575
Completed doses ...	2,126	1,407
Completed doses: Under five ...	2,091	1,360
Five to fifteen ...	35	47
	<u>2,126</u>	<u>1,407</u>

Cholera, Typhoid, Tetanus and Typhus

151 (132) individuals, mostly persons going abroad and mainly wives and families of service men, were vaccinated for one or more of the above diseases.

The actual numbers were:

	1954	1953
Cholera ...	24	9
Cholera-typhoid ...	27	34
Typhoid ...	93	78
Tetanus-typhoid ...	6	11
Typhus ...	1	0
	<u>151</u>	<u>132</u>

51 (43) international certificates for cholera were issued.

Needle Sharpening

This is undertaken at the clinic by the male orderly. The number of needles sharpened during the year was:

	1954	1953
Maternity and Child Welfare ...	3,265	2,073
Victoria Nurses	1,808	1,342
Immunisation Clinic	3,660	1,540
	<u>8,733</u>	<u>4,955</u>

B.C.G. Vaccination

In accordance with a proposal approved by the Minister under Section 28 of the National Health Service Act, 1946, a B.C.G. campaign amongst the 13-year-old age-group of school children, whose fourteenth birthdays fall within six months of the proposed date of vaccination, was commenced on the 5th November, 1954.

Lists of children in the required age-group were compiled and sent to the head teachers, together with an explanatory leaflet prepared by the National Association for Prevention of Tuberculosis and a letter from the Medical Officer of Health (with consent form attached) for issue to each of the parents concerned. The consent forms after completion were returned by head teachers to the Health Department. The number of refusals by the parents was satisfactorily low—only 12%.

Testing and vaccination are carried out in the schools twice weekly. The superintendent school nurse visits and performs a preliminary tuberculin test following the procedure laid down by Professor Heaf, using the "Heaf" multiple puncture apparatus and P.P.D.(S) of the strength 2·0 mg. per ml. Three or four days later the Medical Officer-in-Charge of Immunisation visits, reads the results of the tests and vaccinates the non-reactors; a certificate of vaccination is then sent to the parents. The parents of the positive reactors are sent an appointment for the child to attend for X-ray at the Mass Radiography Unit, Saint Mary's Hospital, Portsmouth, and at the same time other members of the family are invited to attend also.

The above procedure has so far proved satisfactory.

STATISTICS RELATING TO B.C.G. VACCINATION (OCTOBER—DECEMBER, 1954)

No. of Schools Visited	Forms sent out	Consent Refused	Number Tested	Absent from School	Already att. Chest Clinic	Negative Reactors (vaccinated)	Positive Reactors	M.R.U. Appts.	Absent from School
14	544	65 (12%)	429	43	7	332 (79·8%)	84 (20·2%)	77	13

MUNICIPAL AMBULANCE AND MEDICAL CAR SERVICE

By the Ambulance Officer

GENERAL

For the first time since the inception of the National Health Service Act, the number of patients conveyed by the Ambulance Service was slightly below the figure for the previous year. This points to the possibility of hospitals, particularly treatment departments, working to the capacity of their available staff and space. This level of patients conveyed may not continue in 1955 and in future years as hospital building and staffing programmes are completed or if more specialist treatment centres begin operating, as such expansions tend to increase demands on the Ambulance Service.

The peak hours of work, from 8.30 a.m. until 5.0 p.m., are much the same as in previous years. The build-up of patients at 10.0 a.m. and at 1.30 p.m. was generally not quite as high as in 1953, this being due, in many instances, to a later start in some clinics, but the consequence of this later start was that the return of some out-patients extended well into the evening.

There was no marked seasonal decline in the number of patients conveyed during the holiday period; generally, the number carried each month remained fairly level.

PATIENT CONVEYANCE

The total number of patients conveyed by this Service during 1954 was 63,567, this being a decrease of 163 (0.2%) in comparison with 1953. There were 14,271 stretcher and 49,296 sitting cases. Admissions were 13.2% of the total conveyed and there was a decrease in this category of 582 patients in comparison with 1953. The greater proportion of the decrease was in patients conveyed to the Infectious Diseases Hospital; other hospitals remained at much the same level as in the previous year. The ratio of stretcher to sitting cases was 3 to 1. Discharges were 8.5% of the total and showed a slight decrease of 156. The Royal Portsmouth Hospital had the highest number of discharges, accounting for approximately 59% of this category. The ratio of stretcher to sitting cases was 1 to 4. Transfers were 16.1% of the total carried, being a decrease of 445 compared with 1953. This was due mainly to a lessening of the numbers transferred from the Royal Portsmouth Hospital, the Eye and Ear Hospital and the Ministry of Health wards in Queen Alexandra Hospital. The ratio of stretcher to sitting cases was 1 to 2. Out-patients were 62.2% of the total and were the greater portion of the work done by this Service. This category showed an increase of 1,020 sitting cases but this increase is comparatively small when compared with the increases of previous years. The highest proportion of this increase was to the Royal Portsmouth Hospital, whilst St. James' Hospital and the Eye and Ear Hospital also showed an increase of out-patients. There was a noticeable decrease in the number of stretcher-case out-patients, but the ratio of stretcher to sitting cases remains much the same at 1 to 15.

The overall ratio of stretcher to sitting cases was approximately 1 to 3 which is much the same as in previous years.

Patients conveyed to places outside the City during the year numbered 1,419, the highest proportion of them being to other hospitals and convalescent homes within the Hospital Management Committee area. There were 207 journeys to places over 50 miles away; of this number, 95 were to Wimbledon and London. In addition to these, 122 patients were transported by train to various places outside the City, usually long-distance.

Patient-carrying mileage during 1954 was 242,791, this being a reduction of 1,391 miles (0·5%) in comparison with 1953. Ambulances covered 136,220 miles and cars 106,571.

EMERGENCY SERVICE

During the year there were 2,385 calls, 2,240 patients and the mileage was 10,656. Calls increased by 73, patients by 48 and mileage by 1,156, compared with the previous year. There was only one malicious call throughout the year but there were 145 calls wherein an ambulance was not required, this being an increase of 6 over the previous year. The distribution of patients to hospitals was 1,845 to the Royal Portsmouth Hospital, 278 to Saint Mary's Hospital and 117 were taken home or to other places. The busiest months of the year in this category were July and August, whilst Saturdays and Fridays had the average highest number of casualties.

RADIO

The radio-telephony equipment installed in March, 1953, continued to give good service. Throughout the year there was only one minor breakdown of the fixed station and very few faults with the mobile stations. This means of communication enabled a still further saving in patient-carrying mileage by a further reduction of "dead" mileage. It is mainly due to radio that the patient-carrying mileage was at the same level as that of 1951, even though the number of patients increased by 10,079 in comparison with that year. The greater part of this saving was in sitting-case car mileage.

The sickness rate in January and February of 1954 depleted the staff by approximately 20% and it was solely due to radio that it was not necessary to engage temporary staff to cover commitments. During the inclement weather in the same months it was also found possible to keep hospitals informed whether or not out-patients could attend and, further, a record of road conditions could be kept and vehicles routed accordingly.

Servicing arrangements with the agents were very satisfactory and at no time was there any undue delay in attending to reported faults. The agents carried out periodic inspections of all sets and, generally, the liaison was excellent.

ANCILLARY WORK

The mileage done in the conveyance of municipal midwives and analgesic apparatus during the year was 12,654, this being an increase of 1,183 in comparison with 1953. Abortive and service mileage for the year was 11,916, which was 139 miles less than the previous year.

CIVIL DEFENCE

The mileage done in Civil Defence training during the year was 23,185, of which 13,781 was by ambulances and 9,404 by cars, this being an increase of 845 miles in comparison with 1953.

Driving instruction was mainly ambulance practice driving with some learner driving instruction which was very much less than in the previous year. There were 1,158 hours of ambulance driving with 108 students doing a conversion or refresher course in this type of driving. There were 812 hours and 27 learners on cars. Of the 27 learners, 15 passed their test, 5 failed, 4 were discontinued and 3 are still under instruction.

Ambulance Section training had 228 students who attended fairly regularly throughout the year with 279 hours of instruction and 3,624 attendances, which was an average of 13 students per hour.

VEHICLES

Little mechanical trouble occurred during 1954, with very few breakdowns on the road; those that did break down were not of a serious nature and at no time jeopardised the life or treatment of patients.

Repairs requiring Central Depot attention were comparatively few and consisted mainly of routine de-carbonising of engines, repainting, etc.

One new ambulance (Commer) and one second-hand ambulance (Morris) were purchased during the year, thus making all operational ambulances post 1948. Three ambulances are held surplus to present operational needs, these being used mainly for Civil Defence training. Two new Austin hire cars were purchased and this type of vehicle has proved extremely useful in the conveyance of sitting cases, not only in the numbers that they can carry but because of their construction which allows the easy entrance and exit of patients.

Accidents wherein Ambulance Service vehicles were involved totalled 16, 3 of which were whilst members of the Civil Defence Ambulance Section were under training. No serious accident occurred at any time and all were generally of a minor nature.

The total overall mileage for the year was 290,546 (ambulances—158,838; cars—131,708).

STAFF

The sickness rate was considerably higher during this year than in previous years and generally, during the first three months of the year, it averaged 4 to 5 members of the staff away each week. There was no absenteeism at any time and the time-keeping of the staff was excellent. Four members of the staff left the Service during the year, either on change of occupation or on retirement.

Courses for the staff during the year were mainly first aid re-qualifying courses.

MUTUAL AID

Mutual aid arrangements made continued to operate satisfactorily and during the year these consisted of conveying patients from South East Hampshire to the Infectious Diseases Hospital and premature babies requiring oxygenaire to Saint Mary's Hospital.

Arrangements that exist with all other Ambulance Services in the meeting of patients from trains and boats continued to operate well and this Service received every assistance in these arrangements.

VOLUNTARY ORGANISATIONS

The Hospital Car Service conveyed 41 patients covering 4,191 miles during this year, this being a decrease of 2 patients and 1,237 miles in comparison with 1953. St. John Ambulance Brigade conveyed 70 casualties covering 606 miles which was an increase of 2 patients but a decrease of 138 miles. The British Red Cross Society conveyed 4 patients covering 147 miles.

STATISTICS RELATING TO THE PERIOD
1st JANUARY TO 31st DECEMBER, 1954

PATIENT CARRYING ANALYSIS

	Patients				Mileage	
Saint Mary's Hospital	20,274	(20,699)			74,545	(73,035)
Infectious Diseases Hospital	1,893	(2,265)			9,713	(15,609)
Chest Clinic	6,137	(6,643)			12,347	(14,321)
Royal Portsmouth Hospital	19,160	(18,449)			62,219	(62,439)
Queen Alexandra Hospital	7,168	(7,401)			31,268	(32,320)
St. James' Hospital	735	(404)			5,561	(2,952)
Eye and Ear Hospital	1,460	(1,533)			6,155	(5,734)
Ministry of Pensions	1,540	(1,754)			5,948	(6,815)
Nursing Homes	222	(328)			1,566	(2,348)
Other requesting authorities	2,738	(2,062)			22,813	(19,109)
Accident Service	2,240	(1,932)			10,656	(9,500)
TOTAL ...	63,567	(63,730)			242,791	(244,182)

Average patients per day	=	174·1	(174·6)
Average miles per patient	=	3·8	(3·8)
Average patient-carrying miles per day	=	665·1	(668·9)

ANCILLARY AND CIVIL DEFENCE ANALYSIS

Analgesic apparatus	12,654	(11,475)
Service and abortive	11,916	(12,055)
Civil Defence	23,185	(22,340)
Immunisation team	—	(14)
TOTAL ...	47,755	(45,180)

WORK OF THE TUBERCULOSIS SERVICE

By the Consultant Chest Physician

The accelerated fall in the death rate from pulmonary tuberculosis has been a feature of the past eight years. A comparable decrease in the number of primary notifications occurring during the year has been slower, as might be expected, to manifest itself. We can now see, however, that this is also showing a significant trend, the primary notifications of pulmonary tuberculosis for 1954 being 200, as opposed to 312 for 1950, and this in spite of increased efforts to find new cases.

DEATHS

	Respiratory	Death rate per 100,000 population	Non- respiratory	Death rate per 100,000 population
1950	87	36	8	3
1951	60	24·6	6	2·5
1952	51	21	11	4·5
1953	46	18·7	6	2·4
1954	38	15·6	7	2·9

PRIMARY NOTIFICATIONS

	Respiratory	Non- respiratory	Total
1950	312	33	345
1951	270	29	299
1952	223	25	248
1953	260	24	284
1954	200	16	216

At the end of 1954 further use was made of the 70 mm. miniature X-ray apparatus at the Chest Clinic by affording facilities to general practitioners in the city to send up cases direct for X-ray, at stated times in the week. This, although a similar service to that run at the Mass Radiography Unit for cases referred by general practitioners, is proving useful.

During the year over 1,000 new contacts were examined and, in the light of the fall in the total number of primary notifications, this reflects credit on the health visiting staff who are largely responsible for persuading contacts to attend for examination, and represents over five new contacts examined for each new notification.

CONTACTS

	1950	1951	1952	1953	1954
New contacts examined ...	762	921	914	993	1107
Number of contacts proved definite cases	11	5	15	33	13

355 child contacts were inoculated with the B.C.G. vaccine and this again represents an increase on the 1953 figure (235).

The number of tuberculous persons on the clinic register at the end of 1954 was 2,158, showing very little change over the past six years. This is of little significance in assessing the present trend of the disease, as a large majority of these people are quiescent or arrested.

NEW PATIENTS EXAMINED

1950	1951	1952	1953	1954
1251	1342	1490	1537	1528

DEATHS BY AGE GROUPS

AGE GROUP	RESPIRATORY		NON-RESPIRATORY		COMBINED		GRAND TOTAL
	M.	F.	M.	F.	M.	F.	
0— 1	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)
1— 4	— (—)	— (2)	— (—)	— (—)	— (—)	— (2)	— (2)
5—14	— (—)	— (—)	— (—)	1 (—)	— (—)	1 (—)	1 (—)
15—24	1 (1)	2 (1)	1 (1)	— (—)	2 (2)	2 (1)	4 (3)
25—34	2 (—)	5 (1)	— (1)	— (—)	2 (1)	5 (1)	7 (2)
35—44	2 (8)	1 (5)	— (—)	— (1)	2 (8)	1 (6)	3 (14)
45—54	3 (5)	4 (3)	1 (1)	1 (—)	4 (6)	5 (3)	9 (9)
55—64	8 (7)	1 (2)	— (—)	— (—)	8 (7)	1 (2)	9 (9)
65 plus	8 (9)	1 (2)	1 (1)	2 (1)	9 (10)	3 (3)	12 (13)
TOTAL ...	24 (30)	14 (16)	3 (4)	4 (2)	27 (34)	18 (18)	45 (52)

(Figures in brackets are those for 1953)

Of the 34 deaths from respiratory tuberculosis, 5 cases (15%) were not notified during life.

NOTIFICATIONS BY AGE GROUPS

	* NEW CASES						
AGE GROUP	RESPIRATORY		NON-RESPIRATORY		COMBINED		GRAND TOTAL
	M.	F.	M.	F.	M.	F.	
0— 1	— (1)	— (—)	— (—)	— (—)	— (1)	— (—)	— (1)
1— 4	1 (10)	2 (9)	1 (—)	— (—)	2 (10)	2 (9)	4 (19)
5—14	11 (11)	5 (8)	— (5)	2 (4)	11 (16)	7 (12)	18 (28)
15—24	24 (25)	22 (24)	2 (2)	2 (3)	26 (27)	24 (27)	50 (54)
25—34	20 (27)	20 (30)	1 (1)	— (1)	21 (28)	20 (31)	41 (59)
35—44	19 (25)	9 (17)	1 (1)	2 (2)	20 (26)	11 (19)	31 (45)
45—54	22 (25)	7 (4)	— (1)	2 (2)	22 (26)	9 (6)	31 (32)
55—64	21 (23)	4 (6)	— (—)	— (1)	21 (23)	4 (7)	25 (30)
65 plus	8 (11)	5 (4)	2 (1)	1 (—)	10 (12)	6 (4)	16 (16)
TOTAL ...	126(158)	74(102)	7 (11)	9 (13)	133(169)	83(115)	216(284)

* Includes all primary notifications and new cases coming to the notice of the Medical Officer of Health by other means

(Figures in brackets are those for 1953)

NUMBER OF CASES ON REGISTER 31st DECEMBER

	1949	1950	1951	1952	1953	1954
Respiratory ...	1,980	1,940	1,906	1,935	2,042	1,993
Non-Respiratory	221	217	203	188	186	165
TOTAL ...	2,201	2,157	2,109	2,123	2,228	2,158

SUMMARY OF CASES OF TUBERCULOSIS ON DISPENSARY REGISTER 1954

DIAGNOSIS	RESPIRATORY			NON-RESPIRATORY			TOTAL			GRAND TOTAL
	MEN	WM.	CH.	MEN	WM.	CH.	MEN	WM.	CH.	
A. (1) No. of definite cases of tuberculosis on Dispensary Register 1st January, 1954	1,116	819	107	65	69	52	1,181	888	159	2,228
(2) Transfers from other Authorities	35	32	1	—	—	—	35	32	1	68
(3) Lost sight of cases returned during the year	3	3	—	—	—	—	3	3	—	6
B. No. of New Cases diagnosed as tuberculosis during the year:										
(1) CLASS A (T.B. minus)	40	27	12	6	7	3	46	34	15	95
(2) CLASS B (T.B. plus)	72	41	7	—	—	—	72	41	7	120
C. No. of cases included in A and B written off the Dispensary Register during the year as:										
(1) Recovered	35	21	1	4	4	1	39	25	2	66
(2) Dead (all causes)	37	17	1	2	3	—	39	20	1	60
(3) Removed to other areas	48	65	5	4	1	—	52	66	5	123
(4) For other reasons	50	38	4	12	3	3	62	41	7	110
D. No. of definite cases of tuberculosis on the Dispensary Register 31st December, 1954	1,099	784	110	52	71	42	1,151	855	152	2,158

ALMONER'S REPORT FOR THE YEAR 1954

The majority of tuberculous patients in Portsmouth have their treatment in the local hospitals, and as the Chest Clinic almoners visit the hospitals frequently they are able to maintain close contact with the patient through all stages of his illness. This continuity of work is very valuable, particularly where there are complex problems, as it affords the opportunity of getting to know the patient and his family well and giving them the help that is most likely to prove constructive.

The doctor refers all new patients to the almoner and this ensures that the patient is aware, from the beginning of his illness, of all the services provided by statutory and voluntary agencies to assist him.

The voluntary societies in Portsmouth have continued to give invaluable help to patients. Hire purchase accounts have been paid off, furniture supplied to families who have been re-housed, fares have been paid for relatives to visit and many other practical forms of help given. In addition to supplying these and many other needs, the Voluntary Tuberculosis Care Committee has recently decided to finance holidays for patients' families, and this should prove a very valuable preventive measure.

Close liaison has been maintained with the Ministry of Labour, and regular sessions are held at the Chest Clinic for those patients who are fit for work. The Consultant Chest Physician, the Disablement Resettlement Officer and the Almoner are present at these sessions and the patient has the opportunity of discussing work he would like to do, and of learning whether this is available and whether the doctor considers it suitable. 123 patients fit for full-time work were referred to the D.R.O. during the year and the majority of these have been placed in suitable employment.

It has been very difficult to find work for patients fit only for part-time, and there is a great need for this as patients, while feeling well but not yet fit to work full-time, get very bored and frustrated at home. Several months ago the Ministry of Labour instituted a scheme whereby patients who were fit to do at least four hours a day could begin training if they were within daily travelling distance from the training centre. As most of the training courses suitable for tuberculous patients, e.g., light engineering, radio repair, tailoring, typewriter repair, etc., are held at Slough, patients from the Portsmouth area could not take advantage of this. The Ministry of Labour has now decided that the scheme is to be extended and hostel accommodation will be arranged for those patients who are too far from Slough to travel daily. There is a medical officer for the training centre but rest hours will be the patient's personal responsibility and his own chest physician will decide when he can increase his working hours. It will be interesting to see how this scheme works but it may well be that patients, particularly married men, will not welcome the idea of a longer period away from home.

The Remploy factory, which employs 26 men and 25 women, has taken on part-time workers in the past but there are no longer any vacancies there. Apart from the fact that there are patients suitable and willing to work at Remploy waiting for vacancies, there are others who would be medically suitable for work in sheltered conditions, but who will not consider Remploy because of the low wages. When they pay for bus fares and lunches they are not any better off than when they are not working and drawing National Assistance.

Several patients have been sent for recuperative holidays, but this service has not been more widely used as patients find the assessment too high, and

find it hard to accept the fact that they are assessed to contribute towards the cost of a recuperative holiday when convalescence under the Regional Hospital Board is free.

Patients are glad to take advantage of the free milk scheme and there are at present 102 patients being supplied with one pint of free milk per day. The Home Help Service is also useful but the assessment of 2/6 per hour in most cases is very high, and it is often necessary to make private arrangements. This can usually be done at a cost of 2/- per hour.

973 patients were helped by the Almoner's Department during the year and 302 home visits were made. The almoners and health visitors work very closely together, and the fact that in Portsmouth the tuberculosis health visitors are based at the Clinic is of the greatest value, as it provides the opportunity for daily discussions and ensures co-operation at every step in helping the patient.

MASS RADIOGRAPHY—1954*Report of the Medical Director***A.—GENERAL****AREAS SURVEYED**

The Unit was away from Portsmouth for ten weeks during the year, but away from its headquarters for more than this period while undertaking surveys in distant parts of the City.

Six centres were visited during a seven-week survey in the Isle of Wight, two weeks were spent in Horsham Town, and one at Christ's Hospital.

This period outside the City is two or three weeks less than in previous years, and was due primarily to financial restrictions.

One mental hospital was visited, a total of 366 patients being examined.

PUBLIC SESSIONS

The appointment system again proved its value; so rapidly were the bookable sessions taken up, that the proposed four weeks were extended to six weeks. During this period 5,530 individuals attended the sessions, and certain other routine commitments were carried out in addition. The impossibility of forecasting the response to general public sessions makes such a scheme well worth-while when it is practicable. It also enables the staff of the Unit to work reasonable and forecastable hours.

B.C.G. ROUTINE

Arrangements were made with the Medical Officer of Health of Portsmouth whereby all children, who were found to be tuberculin-positive during the skin testing prior to B.C.G. inoculation, were offered appointments for X-ray at the Unit. The X-raying only came into operation during December 1954, but in this month 71 children were X-rayed, no cases of active disease being found.

Parents were encouraged to have themselves and any other member of the family aged 5 years and over X-rayed at the same time, and fifty individuals were X-rayed as a result. Appointments were offered to the parents for those members of the family who did not attend for an X-ray, but both the proportion of acceptances (9%) and the number of accepted appointments which were fulfilled (27%) was so small that this method of trying to attract new groups of individuals was subsequently abandoned.

The positive reactors showed a high proportion of healed primary lesions: subsequently, cases of active disease have been found and it is felt that this is the most economic method of dealing with school-leavers.

TYPE OF WORK

I have previously emphasised the necessity to attract those who have not been through the Unit previously. Of the special groups examined, the rate of active tuberculosis is still highest in the general practitioners' group (10%), though this is less than in previous years (15% in 1953). The men in this group still show the highest rate (15% in 1954 and 25% in 1953). The difference between the sexes in this group is due to the increasing number of fit ante-natal patients referred for routine examination.

SILVER RECOVERY

A silver recovery machine was installed during this year, and has proved itself to have been well worth-while.

CO-OPERATION OF STAFF AND OTHERS

The increased work done by the Unit has called for hard work by all members of the Unit staff, and I would like to take this opportunity of thanking each one for his or her part. Team work is an essential in a mass radiography unit.

I would also like to thank the medical officers of health of the various areas for their assistance and co-operation. A good example of the latter is the X-raying of the tuberculin-positive school-leavers under the Education Department's B.C.G. Scheme.

Finally, my thanks to the various chest physicians concerned for accepting the increased work given to them, and for their assistance and forbearance with the present "forms".

B.—STATISTICAL

1.—ALL AREAS

Once more the total of individuals examined is the highest yet recorded.

In 1953 there was a rise in the proportion of active tuberculous cases found for the first time since 1948. I am glad to say that this has fallen in 1954, from 2·9 per 1,000 to 2·5 per 1,000, much the same figure as in 1952. As was suggested, the figure for 1953 was boosted by an increase in the number of mental hospital patients examined. In 1954 a smaller number was examined in this group (366 patients, and one case of active disease), so that it can be seen that the amount of disease found in the general population has remained about the same during the last three years.

The rate for men is unchanged at 2·8 per 1,000, that for women falling from 2·9 to 2·0 per 1,000.

One feature of interest is a change in the age distribution of the active cases. Attention has been called previously to the fact that the highest rate of disease is found in the men over 60, whereas the women at this age group show a low rate, being highest for women in the 15–24 group in early years, and in more recent years in the 25–34 group. In 1954, the most vulnerable age group for men was still the over 60 group, but the highest rate for women is also in this age group this year.

A total of 24 malignant growths was found—a welcome fall from the 32 of the previous year.

2.—PORTSMOUTH

A total of 37,007 individuals was X-rayed in the City; of these, 102 or 2·76 per 1,000 were found to have active tuberculosis. This continues the downward trend for cases found in Portsmouth—(1952–3·1, 1953–2·9).

The 2,513 cases examined as general practitioners' referrals is higher than in 1953, and still yields the highest proportion of active cases.

Follow-up examinations have continued, a total of 1,660 such examinations being carried out. This aspect of the work is to be reduced on instructions from the Board, but 12 cases of active tuberculosis were diagnosed during the year in this group.

Some 260 skin tests were carried out.

TOTAL NUMBERS EXAMINED BY MINIATURE FILM AND AGE GROUP DISTRIBUTION
TABLE I

AGE GROUP DISTRIBUTION										
	Under 15 years		15-24		25-34		35-44		45-59	
	No.	%	No.	%	No.	%	No.	%	No.	%
Male	1,913	3.91	6,734	13.77	6,331	12.94	5,187	10.60	6,426	13.14
Female	1,541	3.15	7,474	15.28	4,935	10.09	3,224	6.59	2,779	5.68
Total	3,454	7.06	14,208	29.05	11,266	23.03	8,411	17.19	9,205	18.82
									2,376	4.86
									48,920	100.00

Number recalled for large film examination=1,843 (% of total examined 3.77)
Number recalled for clinical examination= 490 (% of total examined 1.00)

ANALYSIS BY AGE — CASES SHOWING EVIDENCE OF ACTIVE PULMONARY TUBERCULOSIS
(Rate per 1,000 in each group)

TABLE II

	Under 15 years		15-24		25-34		35-44		45-59		Over 60		Total previous columns	
	No.	Rate per 1,000	No.	Rate per 1,000	No.	Rate per 1,000	No.	Rate per 1,000	No.	Rate per 1,000	No.	Rate per 1,000		
Male ...	5	2·61	17	2·52	18	2·84	12	2·31	19	2·96	8	5·14	79	2·81
Female ...	5	3·24	19	2·54	10	2·03	1	0·31	4	1·44	3	3·65	42	2·02
Total ...	10	2·90	36	2·53	28	2·49	13	1·55	23	2·50	11	4·63	121	2·47

ANALYSIS OF ABNORMAL FINDINGS

TABLE III

	Male	Female	Total	Rate per 1,000
SECTION A:				
1. CASES OF INACTIVE PULMONARY TUBERCULOSIS				
(a) Primary lesions (21)	1,150	757	1,907	38·98
(b) Post-primary lesions (24)	470	260	730	14·92
2. NEWLY DISCOVERED CASES OF ACTIVE PULMONARY TUBERCULOSIS				
(a) Primary disease (20a & b)	6	10	16	0·33
(b) Unilateral post primary disease (22a & b)	44	20	64	1·31
(c) Bilateral post primary disease (23a & b)	24	12	36	0·74
(d) Pleural effusions	5	—	5	0·10
3. CASES RECOMMENDED FOR HOSPITAL OR SANATORIUM	73	32	105	2·15
4. CASES RECOMMENDED FOR OBSERVATION ...	125	73	198	4·05
SECTION B:				
NON-TUBERCULOUS CONDITIONS				
(a) Abnormalities of bony thorax and lungs (1)	544	528	1,072	—
(b) Bronchitis and emphysema (2)	205	95	300	—
(c) Bronchiectasis (6)	45	24	69	—
(d) Pneumonia and pneumonitis (3, 4, 5) ...	22	34	56	—
(e) Pneumoconiosis (8, 9)	3	—	3	—
(f) Pleural thickening and fibrosis (7, 10, 11) ...	913	351	1,264	—
(g) Intra thoracic new growths (14)				
(i) Malignant	20	4	24	—
(ii) Non-malignant	—	—	—	—
(h) Cardiovascular lesions				
(i) Congenital (15)	6	4	10	—
(ii) Acquired (16)	217	255	572	—
(i) Miscellaneous	167	95	262	

N.B.—Numbers in brackets refer to the Ministry of Health classification.

SURVEY ANALYSIS (ORGANISED GROUPS)

TABLE IV

TYPE OF SURVEY	NUMBER EXAMINED			NUMBERS SHOWING EVIDENCE OF ACTIVE PULMONARY TUBERCULOSIS					
	Male	Female	Total	Male		Female		Combined Total	Combined Incidence per 1,000
				No.	Incidence per 1,000	No.	Incidence per 1,000		
A General Public	3,151	7,021	10,172	13	4.13	9	1.28	22	2.16
B Industrial Groups ...	18,148	6,975	25,123	39	2.15	12	1.72	51	2.03
C School Groups	2,775	2,104	4,879	3	1.08	3	1.43	6	1.23
D General Practitioner Groups	985	1,528	2,513	15	15.23	10	6.54	25	9.95
E Institutional Groups ...	687	424	1,111	2	2.91	1	2.36	3	7.08
F National Service Recruits	1,434	—	1,434	3	2.09	—	—	3	2.09
G Others	965	2,723	3,688	—	—	—	—	—	—
includes:									
(a) Ante-Natals ...	—	1,800	1,800	—	—	5	2.78	5	2.78
(b) Contacts ...	317	183	500	1	3.15	2	10.93	3	6.00
(c) Out-Patients ...	514	515	1,029	3	5.84	—	—	3	2.92

PORTSMOUTH
CASES OF ACTIVE TUBERCULOSIS

TABLE V

	Under 15		15-24		25-34		35-44		45-59		Over 60		TOTAL	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Number examined . . .	1,602	1,510	3,561	6,075	4,214	3,880	3,649	2,359	4,733	1,937	1,145	542	20,704	16,303
Number of Active Cases	5	4	15	19	11	8	11	1	17	1	7	3	66	36
Rate per 1,000 examined	3.12	2.65	2.80	3.13	2.61	2.06	3.01	0.42	3.59	0.52	6.11	5.54	3.19	2.21
Combined Rate . . .	2.89		2.97		2.35		2.00		2.70		5.93		2.76	

MENTAL HEALTH SERVICE

By the Executive Officer

1.—Administration

(A) *Committee*

The prevention, care and after-care of mental illness and mental defectiveness are undertaken by the Mental Health Service, which is administered by the Mental Health Sub-Committee of the Health Services Committee.

(B) *Staff*

Under the direction of the Medical Officer of Health the work of the Service is performed by the following staff:—

One medical officer employed part-time on the supervision of mental defectives in their own homes.

Executive Officer—lay administrator, petitioning officer, with duly authorised officer powers.

Senior psychiatric social worker—has petitioning officer and duly authorised officer powers.

Six mental health social workers—three men and three women, of whom the former have duly authorised officer powers. One has, in addition, petitioning officer powers. Of the three men, two were for many years relieving officers and the third a charge nurse in a mental hospital; and, of the three women, two possess social science diplomas, and the third, though without academic qualification, has had many years' experience in social work.

OCCUPATION CENTRE STAFF

Supervisor.

Handicraft Instructor.

Five Assistants.

Handicraft Instructress

(who is also part-time home teacher).

(C) *Co-ordination with Regional Hospital Boards and Hospital Management Committees*

There is still user of the local health authority's staff by Saint Mary's Hospital in the supervision of mental defectives on licence from that hospital.

The advisory service of the psychiatrists of St. James' Hospital continues to be available to the local health authority through the normal consultant channels.

(D) *Duties delegated to Voluntary Associations*

No duties are (or were) delegated to any voluntary association.

(E) *Training*

The staff of the Service is unchanged since the last report, and all members are trained social workers. No university or similar students have been taken for training during the year.

2.—Account of Work undertaken in the Community

(A) *Under Section 28, National Health Service Act, 1946*

The Service continued to maintain a close liaison with the various regional and local departments of the National Health Service, and with the Ministry of Labour, Ministry of Pensions, and all other social agencies in the City, in the provision of community care for the prevention of mental illness, and the care and after-care of mental patients and mental defectives.

The major difficulty in the rehabilitation of mental patients and mental defectives in Portsmouth arises out of the fact that it is a City with no large industries, and, apart from H.M. Dockyard, there are few opportunities for placing mental defectives in particular in suitable employment, the unemployment rate among normal persons being among the highest in the country. A good deal of the employment which is available is seasonal, and confined to that part of the City (Southsea) which attracts holiday makers as a seaside resort.

Another difficulty is that an appreciable proportion of the City's population consists of Service people who make demands upon the Mental Health Services of equal importance with those of Portmuthians, even though individually they may not be in the City for very long.

(B) *Under the Lunacy and Mental Treatment Acts, 1890-1930.*

566 (515) persons were referred as cases of alleged mental illness. Of those cases dealt with under the Lunacy Act, 1890, 194 were admitted to designated wards under Section 20. 49 were admitted thereto by Order of Justices under Section 21; 35 were admitted to mental hospitals under Section 16, and 15 to mental hospitals by Urgency Orders under Section 11. Of those dealt with under the Mental Treatment Act, 1930, 69 became voluntary patients under Section 1, and 62 were admitted to mental hospitals as temporary patients under Section 5. Because of the lack of more appropriate accommodation, 15 cases were admitted to geriatric wards. In 127 cases the Justices to whom notice was given considered no action was required. The extreme shortage of hospital observation beds designated for the purposes of Sections 20 and 21 of the Lunacy Act, 1890, is still attended by the undesirable risk of recourse to admission to mental hospitals by reception and temporary treatment orders.

Portsmouth is a "hospital area", and during the summer months attracts large numbers of visitors, from the Midlands in particular, among whom there are quite frequent cases of mental illness which break down here—possibly having come to the seaside "as a tonic for their nerves". This results in a considerable number of patients brought to the notice of the duly authorised officers having eventually to be taken by them to mental hospitals other than that which serves the City—in some instances at great distance.

(c) *Under the Mental Deficiency Acts, 1913-1938*

(i) ARRANGEMENTS FOR ASCERTAINING AND SUPERVISING MENTAL DEFECTIVES

The liaison with other departments and agencies mentioned above has been developed to the extent that the powers and duties of the local health authority concerning mental defectives are widely known. In the process of ascertainment, where diagnostic confirmation is required, this is available through the consultant services of the psychiatric staff of St. James' Hospital and supervision is carried out by the foregoing staff of social workers.

At the end of 1954 there were 232 mental defectives under statutory supervision, and a further 401 under "voluntary supervision", not being "subject to be dealt with".

(ii) GUARDIANSHIP

Mental defectives under guardianship (of whom there were 84 at the end of the year) are similarly supervised, the frequency of visitation being determined by the nature of the case. Medical supervision under Article 76(1) of the Mental Deficiency Regulations, 1948, is carried out by a part-time medical officer of the Council. Of the number given, 9

cases were, at the end of the year, placed with nominees of the Guardianship Society. Of both these and local cases, the majority of those needing pecuniary assistance are now maintained by the National Assistance Board.

Mental defectives on licence locally from Saint Mary's Hospital and other mental deficiency hospitals are supervised by the Mental Health Service, by arrangement with the various hospital management committees.

(iii) ARRANGEMENTS FOR PROVIDING OCCUPATION AND TRAINING FOR DEFECTIVES

An Occupation Centre for mental defectives is in operation, having 70 patients of both sexes on the register at the end of 1954, chiefly of low-grade feeble-minded and imbecile grade, divided into primary mixed and intermediate mixed classes, and a senior male class. Instruction is given in sense training, elementary handicrafts, reading and writing and physical training. A senior female class of 20 meets on three afternoons and one morning weekly, under the handicraft instructress, who also gives some home teaching to suitable cases.

During the year, after consideration of the need to expand the facilities for the central training of mental defectives, and the urgent necessity for suitable premises to be available for such training, the Council sought and obtained the approval of the Minister to the erection of an Occupation Centre for 137 mental defectives and by the end of the year preparation of plans for this had been commenced. This Occupation Centre will supersede the premises in which the Occupation Centre and female class above referred to are at present established, these being rented church halls.

The shortage of institutional accommodation for mental defectives produced very grave difficulties during the year; despite approaches made to the appropriate authorities the situation at the end of the year in this direction was, if anything, worse than at the beginning.

INFECTIOUS DISEASES HOSPITAL

By the Physician Superintendent

ADMISSIONS

The total number of admissions was lower than in 1953.

During the year 970 fever (in 1953—1,458), 69 geriatric (in 1953—74), and 289 tuberculosis cases (in 1953—298) were admitted, making a grand total of all cases admitted 1,321 (in 1953—1,830).

Of the fever cases, 247 (in 1953—421) were admitted from outside of the City boundary. There were no Service cases.

DISCHARGES AND DEATHS (FEVER)

Discharges—960. Deaths—26. TOTAL—986.

Of this number, 250 discharges and 11 deaths were outside of the City boundary, making a total of Portsmouth cases—725.

CASES DISCHARGED DURING 1954

Month	Scarlet Fever	Diph- theria	Other Infections	Non- Infections	Deaths	TOTAL
January ...	12	—	50	38	4	104
February ...	8	—	36	28	5	77
March ...	4	—	42	29	3	78
April ...	15	—	37	27	1	80
May ...	7	—	35	28	—	70
June ...	12	—	27	34	3	76
July ...	11	—	27	37	—	75
August ...	19	—	49	49	1	118
September ...	11	—	26	23	4	64
October ...	17	—	34	34	2	87
November ...	9	—	42	32	2	85
December ...	17	—	21	33	1	72
TOTAL ...	142	—	426	392	26	986
Outside Cases...	27	—	125	98	11	261
Portsmouth Cases ...	115	—	301	294	15	725

DEATHS—1954

During the year there were 26 deaths from the causes stated below:

Pertussis ...	4	Sonné Dysentery and Myocardial	
Broncho-Pneumonia ...	1	Degeneration ...	1
Chronic Miliary Tuberculosis ...	1	Acute Fulminating Meningococcal	
Erysipelas and Senility ...	1	Meningitis ...	1
Carcinoma of Rectum ...	1	Hypertensive Cardiac Failure and	
Gastro Enteritis ...	9	Senility ...	1
Broncho-Pneumonia and Gastro		Acute Infective Polyneuritis, Guillian	
Enteritis ...	3	Barré Syndrome and Respiratory,	
Broncho-Pneumonia and Pneumococ-		Bulbar and Cardiac Failure ...	1
cal Meningitis ...	1	Acute Gastro Enteritis and Hemi-	
		plegia ...	1

The following table gives in more detail the deaths for 1954.

Under 1 year	...	16
1-5 years	...	1
5-20 years	...	3
70+	...	6
		—
		26
		—

This gives a mortality rate for infectious diseases of 2·7%.

It will be noted that, of the 26 deaths, 22 occurred in the extremes of life, i.e. under one year and 70+. Also 11 deaths occurred within 12-24 hours of admission to this hospital. The following table gives a more detailed analysis of the ages of the cases which died within 24 hours of admission.

UNDER ONE YEAR.							
0-14 days	14-28 days	1-3 mths.	3-6 mths.	6-9 mths.	9-12 mths.	5-20 yrs.	70+
—	—	2	2	1	2	1	3

No comment need be made of the deaths occurring in the 70+ age group.

Diphtheria

There were 9 cases (Portsmouth—7) admitted as observation diphtheria, but no cases proved to be this disease.

Scarlet Fever

There were 152 cases (Portsmouth—125) admitted as scarlet fever.

Paratyphoid and Typhoid Fever

There were 6 cases (Portsmouth—3) admitted as paratyphoid fever and 2 as carriers. 3 cases (Portsmouth—1) proved to be paratyphoid, and two paratyphoid carriers. There were 2 cases of typhoid fever (Portsmouth).

Puerperal Pyrexia

There were 24 cases (Portsmouth—12) admitted as puerperal pyrexia.

Poliomyelitis

During the year there were 22 cases (Portsmouth—18) admitted as poliomyelitis. 3 (Portsmouth) proved to be poliomyelitis. These can be sub-divided into 2 paralytic and 1 non-paralytic.

Meningitis.

There were 12 cases (Portsmouth—7) admitted as meningitis and 4 (Portsmouth—1) admitted as tuberculous meningitis. 21 (Portsmouth—15) proved to be meningitis and 6 (Portsmouth—3) tuberculous meningitis. One case (Portsmouth) proved to be tuberculous meningitis and miliary tuberculosis.

Since the coming into operation of the National Health Service Act in 1948 that resulted in divorcing the diagnosis and treatment of infectious diseases from the epidemiology, all of which were previously carried out by the Health Department of the Local Authority, the most close liaison exists between this hospital and the staff of the Medical Officer of Health. At all times the closest co-operation has continued in the investigation of cases of infection.

I would like to take this opportunity of thanking the Medical Officer of Health and his staff for their very great help.

	Scarlet Fever	Diphtheria	Typhoid and Paratyphoid Fever	Meningococcal Infect'n	Acute Polio-myelitis		Erysipelas	Dysentery	Measles	Whooping Cough	Ophthalmia Neonat'm	Puerperal Pyrexia	Notifiable Pneumonia	Food Poisoning	Acute Encephalitis-Infective	Malaria	Tuber-culosis		TOTAL
					Paralytic	Non-paralytic											Pulmonary	Other Forms	
Jan. 2	2	-	-	-	-	-	-	-	-	2	-	-	-	-	-	-	-	-	4
" 9	-	-	-	-	-	-	-	-	-	10	-	-	4	1	-	-	3	-	18
" 16	3	-	-	-	-	-	-	-	1	25	-	3	1	-	-	-	5	-	38
" 23	4	-	-	-	-	-	-	-	-	16	-	5	1	-	-	-	2	-	28
" 30	4	-	-	-	-	-	-	-	2	14	-	5	-	-	-	-	6	-	31
Feb. 6	1	-	-	1	-	-	1	-	-	10	-	-	-	-	-	-	1	-	14
" 13	2	-	-	-	-	-	-	-	-	5	-	1	1	-	-	-	4	-	13
" 20	2	-	-	1	-	-	-	1	1	10	-	1	-	-	-	-	5	-	21
" 27	-	-	-	-	-	-	-	1	-	14	-	5	2	-	-	-	8	-	30
Mar. 6	1	-	-	-	-	-	-	-	-	14	-	2	3	-	-	-	11	1	32
" 13	2	-	-	-	-	-	-	-	-	13	-	2	-	-	-	-	5	-	22
" 20	6	-	-	1	-	-	-	-	-	11	-	1	2	-	-	-	3	1	25
" 27	9	-	-	-	-	-	-	-	2	21	-	1	-	-	-	-	12	-	45
April 3	1	-	-	-	-	-	-	-	-	3	-	-	-	-	-	-	5	-	9
" 10	2	-	-	-	-	-	-	2	1	10	-	2	1	-	-	-	7	-	25
" 17	3	-	-	1	-	-	-	-	-	5	-	2	-	-	-	-	6	-	17
" 24	2	-	-	-	-	-	-	-	-	11	1	2	-	-	-	-	6	1	23
May 1	2	-	-	-	-	-	-	-	-	10	-	2	3	-	-	-	1	-	18
" 8	-	-	-	-	-	-	1	-	-	13	-	1	2	-	-	-	3	-	20
" 15	4	-	-	-	-	-	1	1	1	8	-	2	-	-	-	-	2	1	20
" 22	2	-	-	-	-	-	-	-	1	13	-	1	-	-	-	-	6	-	23
" 29	1	-	-	-	-	-	-	1	1	12	-	1	1	-	-	-	4	-	21
June 5	3	-	-	-	-	-	-	-	3	13	-	1	1	-	-	-	4	-	25
" 12	2	-	-	-	-	-	-	-	1	4	-	4	-	-	-	-	2	-	13
" 19	1	-	-	-	-	-	1	1	5	6	-	1	-	-	-	-	2	-	17
" 26	5	-	1	2	-	-	-	1	5	16	-	3	-	-	-	-	3	1	37
July 3	1	-	-	-	-	-	-	-	4	6	-	1	-	-	-	-	5	1	18
" 10	4	-	1	-	-	-	1	1	1	5	-	-	-	-	-	-	3	-	16
" 17	4	-	-	-	-	-	2	-	3	11	-	-	-	-	-	-	4	1	25
" 24	7	-	1	-	-	1	1	1	3	4	-	1	2	2	-	-	2	-	25
" 31	8	-	1	-	-	-	1	-	-	15	1	3	-	-	-	-	5	-	34
Aug. 7	4	-	-	-	-	-	-	1	1	7	-	5	1	-	-	-	1	-	20
" 14	1	-	-	1	-	-	1	4	1	-	-	2	2	-	-	-	2	-	14
" 21	2	-	-	-	-	-	-	5	2	6	-	3	-	1	-	-	2	-	21
" 28	1	-	-	-	-	-	-	-	-	5	-	2	1	1	-	1	5	1	17
Sept. 4	3	-	1	-	-	-	-	3	1	7	-	2	-	-	-	-	5	1	23
" 11	5	-	-	1	-	-	1	-	-	9	-	2	-	1	-	-	2	1	22
" 18	2	-	-	-	-	-	-	-	-	8	-	2	-	1	-	-	7	1	21
" 25	4	-	-	-	-	-	-	-	1	4	-	2	1	2	-	-	6	-	20
Oct. 2	3	-	-	-	1	-	1	-	1	5	-	-	-	-	-	-	-	-	11
" 9	4	-	-	-	-	-	1	-	-	3	-	1	-	3	-	-	2	1	15
" 16	5	-	-	-	-	-	-	-	-	-	-	-	-	6	-	-	5	-	16
" 23	6	-	-	-	-	-	-	1	-	2	-	1	1	1	-	-	1	-	13
" 30	3	-	-	-	-	-	1	-	-	3	-	1	-	1	-	-	6	1	16
Nov. 6	2	-	-	1	-	-	-	1	-	2	-	-	-	1	-	-	5	1	13
" 13	5	-	-	-	-	-	2	-	-	6	-	2	2	4	-	-	3	-	24
" 20	5	-	-	1	1	-	-	-	-	-	-	1	-	2	-	-	1	-	11
" 27	6	-	-	-	-	-	1	-	-	-	1	1	-	2	-	-	2	-	13
Dec. 4	7	-	-	1	-	-	-	-	2	-	-	3	2	1	-	-	4	-	20
" 11	5	-	-	-	-	-	-	-	-	3	-	3	-	3	-	-	2	2	18
" 18	1	-	-	-	-	-	-	-	-	5	-	1	-	1	-	-	1	-	9
" 25	9	-	-	-	-	-	1	-	2	4	-	-	1	2	-	-	3	-	22
Total	171	-	5	11	2	1	18	25	46	409	3	87	35	36	-	1	200	16	1066
1953	341	1	4	8	10	3	27	14	2920	634	4	85	68	28	1	1	260	24	4433
Deaths 1954	-	-	-	2	}		-	-	-	3	-	-	*	1	-	-	38	7	174
1953	-	-	-	3	}		-	-	1	3	-	-	156	-	-	-	46	6	218

* All Forms

VENEREAL DISEASES TREATMENT CENTRE

By the Venereal Diseases Officer

The figures for infected syphilis shew a new "low", being only 2 cases, one infection being that of a migrant who acquired the disease in London before passing on. The other was acquired abroad, in Spain.

In gonorrhoea, there was an increase of 9 cases on the female side; the male figures were stationary. The increase is, I think, due to even a closer liaison in the Almoner's Department with the Naval authorities, resulting in a successful persuasion in getting the contacts to come up for treatment.

One case of lymphogranuloma venereum was seen in a man on leave from Africa and treatment was continued here with good results.

TABLE OF STATISTICS

	1954			1953		
	M.	F.	Total	M.	F.	Total
No. of patients under treatment or observation on 1st January	172	170	342	140	130	270
No. of patients dealt with for the first time during the year	360	169	529	414	181	595
No. of patients discharged on completion of treatment and final tests of cure, etc.	336	165	501	332	125	457
No. of patients who ceased to attend before completion of treatment	2	1	3	1	3	4
No. of patients who defaulted before final discharge	19	18	37	17	12	29
No. of patients transferred to other centres or to the care of private practitioners	89	23	112	68	26	94
No. of patients remaining under treatment or observation on 31st December ...	136	158	294	172	170	342
No. of attendances—						
(a) for attention by the physician	3,129	1,854	4,983	3,055	2,423	5,478
(b) for intermediate treatment	933	685	1,628	1,050	1,114	2,164
TOTAL ATTENDANCES ...	4,062	2,549	6,611	4,105	3,537	7,642

DETAILS OF WORK OF THE ALMONER

	1954	1953
Number of patients helped by Almoner	86	119
Visits paid by Almoner	58	74
Number of patients visited by Sister Trimble	7	18
Reports and letters sent	98	125
,, ,, ,, received	54	73
Number of interviews	126	226
,, ,, attendances	2,549	3,537

PARASITIC INFESTATION

*By the Medical Officer in Charge, Disinfestation Clinic***Scabies**

The number of cases of scabies seen during the year showed a marked decrease over 1953.

Total number of cases dealt with during the year:—

					1954	1953
Cases	...	...	...	...	64	87
Contacts	...	...	...	...	21	82
TOTALS					85	169

Ten cases were referred from the out-patient departments of the City's hospitals, one from Petersfield, six from private practitioners and the remainder by the School Clinics.

Three families attended more than once with fresh infestation. Two contacts were notified to the Royal Navy, one of whom was found to be infested.

A 25% emulsion of Benzyl Benzoate (B.P.) with added emulsifying wax remained the treatment of choice. A small trial was made with "Lorexane" cream and, although this preparation was found satisfactory, it was more expensive than Benzyl Benzoate.

Distribution as to age and sex was:—

	Under 5			5—15			Over 15			Totals		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Cases ...	5	5	10	10	18	28	7	19	26	22	42	64
Contacts ...	2	2	4	1	2	3	1	13	14	4	17	21
Totals ...	7	7	14	11	20	31	8	32	40	26	59	85
Sent by Private Doctors	—	—	—	2	2	4	—	2	2	2	4	6

Total attendances for the year—Original ... 85

Subsequent ... 80

GRAND TOTAL ... 165

No letters warning of possible legal proceedings for non-attendance at the clinic were required.

The following table gives figures for the previous eight years:—

	CASES	CONTACTS
1947 ...	656	521
1948 ...	357	243
1949 ...	160	127
1950 ...	64	76
1951 ...	47	65
1952 ...	109	100
1953 ...	87	82
1954 ...	64	21

Pediculosis

It is gratifying to record a decrease in the number seen and treated.

During the year 112 households, comprising 124 families and 480 individuals, of whom 279 were actually infested, were dealt with.

The distribution as to age and sex was:—

	Under 5			5—15			Over 15			Totals		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Infested ...	8	17	25	69	104	173	19	62	81	96	183	279
Not Infested	11	27	38	32	35	67	53	43	96	96	105	201
Totals ...	19	44	63	101	139	240	72	105	177	192	288	480
Sent by Private Doctors	—	1	1	1	—	1	2	2	4	3	3	6

ATTENDANCES

	Under 5			5—15			Over 15			Totals		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Original ...	19	44	63	101	139	240	72	105	177	192	288	480
Subsequent...	18	30	48	142	208	350	9	103	112	169	341	510
Totals ...	37	74	111	243	347	590	81	208	289	361	629	990

62·0% of those infested were school children aged 5–15, this being the age-group of children who are inspected in the schools. The other groups are brought to notice mainly through the school children being found infested.

Most of the cases were sent by the School Health Service, but six were referred by private doctors, two by the police, two by H.M. Dockyard, one by the National Assistance Board and six by Queen's nurses. Six families attended more than once for fresh infestations during the year. Two cases of infestation with *phthirus pubis* (crab-louse) were seen. No infestation by body lice was seen.

Letters giving warning of possibility of prosecution under Section 85 of the Public Health Act, 1936, were sent to three individuals; all had the desired effect. On three occasions Ambulance Service vehicles were used to fetch patients who were medically unfit to attend the clinic of their own accord. Problem families constituted a large part of the clientele.

The treatment of choice continued to be a proprietary emulsion containing D.D.T. and Pyrethrin. Trials were made with a proprietary preparation containing B.H.C. isomer; this was found very satisfactory but had to be ruled out on account of the higher cost. Trials continued with a cheaper form of B.H.C.

The following table gives comparative figures of infested persons treated at the Clinic since 1947:—

1947	...	...	...	...	640
1948	...	...	...	...	573
1949	...	...	...	...	826
1950	...	...	...	...	916
1951	...	...	...	...	733
1952	...	...	...	...	850
1953	...	...	...	...	479
1954	...	...	...	...	279

Flea Infestation

Until September, 1954, 79 cases of flea infestation, 44 of which were school children, were referred to the clinic. In view of the fact that flea infestation is chiefly in the dwelling and not only on the person, it was felt that it was unnecessary for school children with flea-bites to attend the clinic for treatment. After September, therefore, all cases of flea infestation in school children were referred to the Chief Sanitary Inspector, so that the homes could be inspected and disinfested if required. The children were not excluded from school.

REPORT OF THE BATHS SUPERINTENDENT

In my previous annual report I commenced with the explanation that, on account of the good weather experienced during that year, records had been created at the Park Road Baths. During 1954, however, it would seem that it was the extraordinarily bad weather, especially in the summer months, which had the effect of driving the people from the beaches to the indoor Baths, thus causing this year to be the greatest in the Baths' history regarding patronage and revenue.

The above factor, coupled with the great assistance given by the Baths' staff and the teachers of the Portsmouth Education Authority, has had the desired effect, culminating in a record total attendance of 135,720 patrons at the Park Road Baths.

My sincere thanks are due to all concerned for the enthusiasm shown in enabling me to make this new attendance record—a total which I considered was impossible to create with the available facilities of this establishment.

One of the pleasing features of the high attendance of 1954/5 was the large increase of 15,784 patrons over the previous year; another was the maintained patronage in every department, with only two exceptions, which occurred in sectional services.

As one can expect from this statement, the financial returns are most attractive, the revenue of £5,190 11s. 7d. showing the good increase of £460 1s. 5d.

SWIMMING BATH SECTION

Re-organisation and the installation of different innovations has certainly assisted me to make this a wonderful year, but without the co-operation of the general public these would have been of little avail; they have been quick and appreciative of my endeavour.

The swimming bath department catered for no fewer than 95,751 patrons, irrespective of the large additional numbers attending with private clubs.

Classes of school children attending the Baths for instruction, organised by the Education Authority under their own instructor and teachers, gave the large total of 39,855, an increase of 4,473 over the previous year, for which all persons connected with the instruction are to be commended for extending this beneficial exercise to the younger generation.

School children attending the Baths before and after school hours at the reduced price of 2d. showed an increase of 1,143, 620 male and 523 females, giving a total attendance of 6,557.

Sectional increases of bathers during public hours were adult males—417; adult females—518; 6d. males—5,023; 6d. females—1,963; in fact, every section has shown a decided increase in the swimming bath department.

From the aforesaid statement a most significant feature is shown in respect of the female swimmers who increased by 3,004. This large expansion is beyond my greatest expectations, especially after the large female increase of the previous year. Spectators with an admission figure of 1,579 had a tremendous increase of 610, thus showing the greatest percentage increase in the establishment; this I attribute partly to persons wishing to see prominent swimmers in training.

Tuition lessons. This service, where the patron receives the exclusive attention of an instructor, provided the large number of 1,294 individual lessons, and constituted a record total, with an increase of 210 lessons, in spite of the exceedingly busy bath which makes the work more exacting.

Private hire of the swimming bath, for the exclusive use of club members, had an attractive year, with $733\frac{3}{4}$ hours of booking, 83 hours more than the previous year, and also a record. The notable feature of these bookings from the survey I have made was the increase in membership attendances; some clubs have more than 100 persons attending. Quite a proportion of the bookings was taken up by underwater clubs, showing that great enthusiasm is still being maintained in this aquatic sport; indeed, this type of underwater swimming is here to stay and will have to be catered for by bathing authorities in the future.

Bookings by the Infantile Paralysis Fellowship, so graciously granted by the Baths Committee for exclusive Sunday morning bathing at the reduced fee, actually showed an increase of 4 bookings in spite of the most severe weather conditions experienced.

There was only one baptismal booking, when many persons were baptised in front of a large congregation.

Season tickets instituted in 1953 had a much greater demand, eight having been purchased. I anticipate this service increasing greatly in the forthcoming years.

Hairdryers had the large number of 10,107 users, increasing the patronage by 3,819; indeed, the demand at times was too great for the four machines now installed.

Brylcreem. Users of this commodity after bathing numbered 10,830, a decrease of 546.

The self weighing machine had 3,021 users, showing an increase of 1,560 and providing a useful service to our bath patrons.

PRIVATE HOT BATHS

Modernisation of this department by installing new slipper baths and fittings is much needed; this was contemplated some six years ago but it is not now so urgent in view of the prospect of rebuilding the Anglesea Road Baths, with provision for slipper and shower baths.

The decorative work undertaken recently, I am delighted to state, has improved the suites considerably; it has increased trade and is appreciated by our many patrons.

Although a national survey would point to a decline in the use of the private baths supplied by local authorities now that more houses with bathrooms are being built, the fact is not borne out by these tabulated returns; in fact, the opposite effect is apparent, for the continued use of this reasonable amenity is being maintained.

Every section of the ladies' and gents' private baths shows improved patronage, except the 9d. bath in both suites, which have had a slight decline over the previous year and have been declining for a number of years. The whole department provided 38,390 private baths, 7,486 ladies and 30,904 male, a total increase of 1,637 baths, of which ladies provided 1,111 and gents 526.

Luma remedial baths are providing a good service, 70 having been taken in the year under review; this is an improvement of 19 baths taken and, allowing for the inclement weather of 1954/5 which prevented many sufferers from coming to the establishment, this increase justifies the new service. The detracting feature of this type of bath is that the profuse perspiration necessitates a long period for cooling before going outdoors and in consequence entails a considerable amount of time.

Thanks are due to the Baths Committee for incorporating this remedial treatment into the Park Road Baths services, thereby relieving many sufferers from rheumatic ailments who have testified to the physical benefits felt after having had one of these baths.

NEW EQUIPMENT

The installation of a new one metre Olympic springboard in the swimming pool is a decided asset and is proving a tremendous attraction to trained and potential divers alike. The Baths Committee are to be complimented on their foresight in adding this up-to-date equipment, thereby providing the essentials which are the basis of good diving and enhancing the chances of the City's divers in county and national championships. This installation has lessened the laments of the divers regarding the inadequate diving facilities.

The introduction of the system of "Hyguardall" hangers (basket system) for patrons' clothes in the extra busy periods is a decided improvement, as the demand for swimming has increased, without the ratio of changing cubicles increasing also.

The coupling of the City's water supply to the existing filtration system has been a great improvement in preventing loss of heat in the swimming bath water and the consequent fluctuations of temperature caused when adding fresh water to the existing treated water. Complaints from patrons regarding this fluctuation in temperature have now decreased to a minimum. Furthermore, the use of the cold mains water, instead of heated and chemically treated swimming baths water, for the back wash of the filtration media has obviated these complaints. The engineers are to be complimented on their efficient workmanship in concluding this engineering improvement.

All other plant and machinery used in connection with the purification, filtration, heating and laundry practice, continued to give satisfactory service in this record year. Breakpoint chlorination, the new method of sterilisation of swimming bath water, also continues to give satisfaction to the swimmers. They in turn have shown their appreciation of the high degree of clarity and attractiveness of the swimming bath water by written and verbal praise, for which I am truly grateful.

GENERAL REMARKS

The demand for accommodation in private bookings of the Park Road Baths exclusively for classes, or organised members of a party, or clubs, is greater than can be provided in the early hours of the evening, the swimming bath being continually booked to 9.15 on most evenings, and sometimes until 10 p.m.

Although the total of 135,720 patrons seems exceedingly high for the patronage of the whole of the establishment of Park Road Baths, I must add to this colossal total the attendances of the numerous clubs who have "Private Bookings" in the evenings; also passes and season tickets, which amount to approximately 20,000 patrons in the year. This gives an idea of the magnitude of the patronage and compares most favourably with any bath of its size in the United Kingdom, notwithstanding the fact that the counter-attraction of the sea is always facing us in the summer months.

REPORT OF THE VETERINARY OFFICER**MEAT INSPECTION**

As derationing of meat was introduced early in July the principles of rationing applied during the first half of the year only. Under rationing, home-killed supplies consisting of beef, veal, pork, mutton and lamb were sent into the City from Fontley, Petersfield and Reading, and were allocated at Greetham Street by the Retailers' Buying Committee to the traders served from the Portsmouth Meat Depot. A number of localities outside the City was again supplied from the local Meat Depot. If the meat was not in a satisfactory condition on arrival, usually the R.B.C. refused to accept and then I was asked for my opinion by the Wholesale Meat Supply Association. During the second half of the year following de-control, home-killed supplies were despatched to the Wholesale Meat Market, Greetham Street, from Fontley, Petersfield, Chichester, Alton, Swindon, Westbourne, Witney, Birkenhead, Southampton, Wimborne, Islington and London (Smithfield). Besides weekly supplies of Irish beef, pork and offal were shipped regularly from Ireland to the Camber. Some of this meat went to the Wholesale Meat Market, Greetham Street, and some local retailers were supplied directly from the Camber. Consignments were moved without delay by road vehicles to Smithfield (London), and other destinations. With the notable exception of foot and mouth disease throughout the year, the country was never completely free for any lengthy period from the notifiable diseases anthrax, swine fever and fowl pest which are commonly encountered in this country. Among the notifiable diseases confirmation of the existence of foot and mouth disease and the areas scheduled by the Ministry of Agriculture, coupled with movement restrictions imposed on susceptible species of animals, can disturb considerably normal meat trade activities, but, as the incidence of foot and mouth disease was exceptionally low throughout the year, there was little interference with the wholesale trade.

MEAT CONDEMNATIONS

English: 684 lbs. part ox liver; 231 lbs. ox liver; 404 lbs. pork; 177 lbs. pig fats; 1,293 lbs. hindquarter beef; 7 lbs. ox tongue; 338 lbs. veal; 104 lbs. calf offal; 5 lbs. lamb; 6 lbs. mutton; 5 lbs. ox breads; 56 lbs. ox hearts; 31 lbs. ox tails; 26 lbs. ox skirts; 27 lbs. forequarter beef; 54 lbs. ox heads; 60 lbs. pigs' liver; 54 lbs. pigs' feet; 16 lbs. pigs' heads.

Imported: 153 lbs. forequarter beef; 2,053 lbs. hindquarter beef; 1,915 lbs. mutton; 405 lbs. pork; 39 lbs. lamb; 204 lbs. pigs' hearts; 18 lbs. lambs' kidneys; 30 lbs. lambs' hearts; 52 lbs. sheep tongues; 1,550 lbs. ox tripe.

PUBLIC HEALTH (MEAT) REGULATIONS

Most of the meat and offal consigned to the City was carried in road vehicles. Considering the difficulties of this task, very little was heard about contaminated meat, a fact which indicates that the work was done satisfactorily. On the whole there was no evidence that the general provisions of the regulations were not well observed. During the first half of the year M.T.O. Ltd. was again responsible for the transportation of meat. The manager of this organisation and his deputy supervised daily meat transport and there was no doubt that their extensive experience and the careful handling of the meat exercised by their staff contributed greatly to the smooth manner in which the work was carried out. One of the pro-

tective measures imposed by the regulations on the wholesale side of the trade is the provision of washable head-gear for the staffs when carrying meat. The designs of this head-gear are not all alike and that used by one of the wholesalers was very unpopular with the men, who complained that it was uncomfortable and caused the wearer to perspire excessively. Representations have been made for consideration to be given to this matter in order to provide an improved type of head-gear in future.

ANTHRAX

The Ministry of Agriculture's returns for January were satisfactory, as a substantial decrease in the monthly total was recorded, compared with that for the previous month. Decreases were also recorded in the months of February and March and clearly the first quarter of the year was a very satisfactory one for this deadly disease. Compared with the corresponding period last year, a striking improvement in the figures was observed—the comparable totals being 71 and 294 respectively. Steady favourable monthly figures without any marked fluctuation were maintained until the end of the first half of the year. Each monthly total was lower than the corresponding one of 1953 and at the 30th June a total of 150 outbreaks was confirmed against the comparable figure of 434 last year. A note-worthy feature of the favourable returns throughout the third quarter was their steadiness. Despite the fact that higher monthly totals were recorded during the last quarter, a spectacular drop in the annual figures justified the Ministry regarding the year as a very satisfactory one. 350 outbreaks involving 378 animals were recorded during the year, compared with the corresponding figures—609 and 641—in 1953.

FOOT AND MOUTH DISEASE

While there was virtually no evidence of this country's complete freedom from foot and mouth disease, there was little doubt that the Ministry of Agriculture was well satisfied with its figures, which indicated a low incidence during the first quarter of the year. At the end of March the figures revealed a drop of about 50% in the number of outbreaks and number of animals involved, compared with the corresponding date last year. A marked improvement was seen during the second quarter of the year, when only one case was detected in April, with the country completely free in May and June. While the Ministry of Agriculture was justified in regarding the position relating to foot and mouth as very satisfactory at the end of the first half of the year, obviously this satisfaction was enhanced by the end of the third quarter as no case was confirmed in Great Britain during that period. The country's good fortune relating to this costly disease continued without interruption until the end of the year, as no outbreak was detected during the last quarter. The Ministry must regard the year as an extraordinarily satisfactory one, due to the exceptionally low incidence of this disease. The annual figures show that in 1954 a total of 12 outbreaks involving 1,300 animals was recorded, with 40 and over 1,700 animals in 1953. The corresponding figures for 1952 were 495 and 75,500. When one remembers the substantial sums of money often required to practise the Ministry's compensation and slaughter policy associated with this disease, one can readily appreciate the great saving to the Treasury which the more favourable comparable figures represent.

SWINE FEVER

The decrease recorded in the monthly total for January was the first favourable return in recent months. This was followed by a further drop in

the returns for February, but during March another increase was recorded. The total figures for the year's first quarter were, however, very encouraging, as 335 outbreaks were detected against 563 for the corresponding quarter last year. There was a steady deterioration of the position until the end of the first half of the year following 3 consecutive increases in the monthly totals. Despite these unfavourable returns, a striking improvement in the comparable annual details at the 30th June was observed. At that date this year a total of 824 outbreaks was confirmed against 1,733 during the first six months of 1953. The first indication that the unfavourable trend in the monthly totals was checked was observed in July when a decrease was recorded. The improvement in the figures continued until the end of the quarter. Although each month an increase was recorded during the last quarter, one can see from the comparable annual details that the Ministry was justified in regarding the year as a very satisfactory one. A total of 1,455 outbreaks was confirmed in 1954, compared with a total of 2,713 during 1953.

FOWL PEST

As the Ministry of Agriculture is well aware that January is a dangerous month for fowl pest, the substantial increase shown in the returns probably caused little surprise. Despite an improvement in the returns for February and March, figures remained high and at the end of March there was an increase of over 100% in the quarterly figures this year, compared with the corresponding ones in 1953. More satisfactory returns throughout the second quarter of the year seemed to indicate that the Ministry had recovered from the serious set-back that it suffered earlier in the year, and had virtually brought this disease under control. From experience one expects great fluctuations associated with fowl pest and, despite its serious figures during the first quarter, the comparable totals for the year's first six months are interesting—541 this year against 508 at the same date in 1953. The improvement in the position was well maintained until the end of September, when a considerable decrease in the comparable annual details was recorded. According to the Ministry the "peak" period of the year for this disease commences about November. Following an increase in the monthly total for October, substantial rises were recorded in November and December. In spite of the fluctuations, no doubt the great improvement in the annual figures will be regarded by the Authorities as very encouraging. A total of 795 outbreaks was confirmed during the year 1954 against 978 in 1953.

PET ANIMALS ACT, 1951

During the year I had no reason to believe that the general provisions of the Act, designed to ensure the welfare of the animals, were not on the whole carefully observed. Despite the comprehensive nature of this Act and the possibilities of the licensed premises being associated with the spread of disease, its working throughout the year was comparatively smooth. A total of 20 pet shops was licensed in the City and 77 visits were made under the Act during the year.

FISH

The following is a list of the various species of fish relating to parcels surrendered after inspection and condemnation:—plaice, bream, prawns, flaps, dogfish, haddocks, kippers, skate, golden cutlets, salmon, mackerel, escallops, fillets (various).

OTHER FOODSTUFFS

As in previous years, practically all kinds of foodstuffs, other than fish,

homekilled and imported meat already mentioned, were handled under this heading. Canned foods were an important item, 14,769 tins being surrendered as unfit for human consumption following inspection.

DUTIES AT THE PORT

No clinical evidence of the existence of any notifiable disease was detected in livestock landing at Point and all animals were able to proceed to their destinations. A total of 32 visits was made to the Dockyard, Camber and Flathouse; a number were of a preventive nature to ensure that certain livestock were not allowed to enter this country illicitly. The regulations are designed to prevent disease entering this country at the Ports. Other visits were associated with the trade in the importation of foodstuffs at the Camber and Flathouse.

FOOD AND DRUGS ACT, 1938

No seizure was necessary during 1954. All foodstuffs unfit for human consumption were dealt with by surrender.

VISITS

1,982 visits were made during 1954, including 612 to meat premises (wholesale and retail), 116 to fish premises (wholesale and retail), 819 to provision shops (wholesale and retail), 59 to piggeries, 139 to sausage makers, 77 under the Pet Animals Act, 1951, and 452 relating to complaints.

INSPECTION AND SUPERVISION OF FOOD

FOOD AND DRUGS ACT, 1938

During the year 1,945 samples were taken under the Food and Drugs Act, 1938. Of these, 140 were found to be adulterated, incorrectly labelled or otherwise unsatisfactory, or 7·2%, compared with 5·2% in 1953. Of these 140 samples, 24 were formal samples, 115 informal or test samples, and 1 private purchase sample.

All the adulterated samples were dealt with by cautions or referred to the appropriate Ministry.

MILK (SPECIAL DESIGNATION) (PASTEURISED AND STERILISED MILK) REGULATIONS, 1949

During the year 79 licences were issued for the sale of pasteurised milk, 33 for sterilised milk, and 3 for tuberculin tested milk.

106 samples of tuberculin tested (pasteurised) milk were examined and all were found satisfactory.

312 samples of pasteurised milk were examined and 4 failed the test.

62 samples of pasteurised milk as supplied to schools were examined and all were found satisfactory.

8 samples of sterilised milk were examined and all passed the test for this type of milk.

MILK

804 samples of milk were taken during the year and 79 were found to be adulterated and 39 not up to standard, the deficiencies being due to natural causes. Of this number, 408 represented milk supplied by farmers to retailers in the City, 75 being found to be adulterated.

ICE CREAM

119 samples of ice cream were taken for examination, with the following results:—

82 samples were Grade 1	6 samples were Grade 3
26 „ „ „ 2	5 „ „ „ 4

During the year 517 visits and inspections were made to ice cream premises.

DRUGS

132 samples of drugs were taken, and 7 were found not to be in accordance with the standards or requirements laid down in the Food and Drugs Act, 1938, the Pharmacy and Medicines Act, 1941, and the Poisons and Pharmacy Act, 1933.

MERCHANDISE MARKS ACT, 1926, AND ORDERS IN COUNCIL MADE THERE-UNDER

During the year 78 visits were made to business premises to see that the provisions of these Orders were being complied with.

REPORT OF THE CHIEF SANITARY INSPECTOR

W. F. APPLETON, F.R.SAN.I., F.S.I.A.

INTRODUCTION

In this preface to my tenth Annual Report it is with pleasure that I comment on the happy relationship which has been maintained during that period between members of the Council, the Medical Officer of Health, the other officers of the Corporation and myself.

Following the precepts of economy practised during and since the war this report is condensed, comment being confined to the more important subjects.

PUBLIC HEALTH ACT, 1936.

GENERAL INSPECTION

3,337 complaints were recorded, of which 93% referred to defective dwellings—an increase over the 90% of 1953, when the total was 3,089. It was again observed that an increase in the annual rainfall—there were 33·13" of rain in 1954, compared with 28·3" in 1953—coincided with a rise in the notification of sanitary defects, and the equation observed in 1952 approximates.

The investigation of these complaints involved 6,969 inspections, resulting in following action:—

Intimation notices issued	...	...	...	1,810
Abatement notices served	...	...	...	632
Letters requiring work "without further delay"				226
Letters requiring work "within 7 days"			...	156
Letters requiring work "forthwith"	...	...		22

The diminishing totals indicate the gradual process of getting notices complied with, and are an indication that only as a last resort are cases sent to the Town Clerk for proceedings to be taken for non-compliance. In this last category 45 persons fell in 1954 and were duly called to appear for summary jurisdiction. Such cases were concluded thus:—

Orders made for work to be done	...	...	...	...	24
Adjourned <i>sine die</i>	...	...	...	...	4
Withdrawn before case heard	...	...	...	...	6
Work completed before case heard but costs obtained					10
Further proceedings	...	...	...	...	1
					—
					45
					—

TENTS, VANS, SHEDS AND MOVABLE DWELLINGS
(SECTION 268, PUBLIC HEALTH ACT, 1936)

TENTS

A colony of tents mushroomed overnight on Portsdown Hill as the result of an overspill from the Cliffdale site, and the report of the district sanitary inspector, together with comment in the Press, caused correspondence between the Parks Department and myself. This unauthorised camping, a highly undesirable practice, occurred during the peak of the August holiday period, and fortunately the dispersal of the campers occurred almost as quickly as their assembly. It is hoped that a precedent has not been established.

INDIVIDUAL CARAVANS

The attention of the Department was again occupied this year by unauthorised parking of caravans; offenders were either artistes appearing at local theatres, who have literally reverted to "travelling players on the road", or employees of firms carrying out contracts in Portsmouth. The attention of the theatre managers and the Chief Constable has been directed to the undesirability of artistes using unlicensed sites but, with the excuses of short stay and accessibility to the theatre, these performers continue this type of offence. Contracting firms on the other hand have been held to their agreements not to station movable dwellings on the site of operations and their caravan of workers has been directed to the legitimate parking ground.

Seven persons were required to remove their wheeled homes from unlicensed sites.

One application to station a caravan was received, but as this concerned only temporary storage of an unoccupied vehicle the Department's jurisdiction was not involved.

CARAVAN SITES

At the Cliffdale site the amenities of the tenants were considerably augmented by the provision of further sanitary conveniences and washing facilities, and the site generally was well maintained.

Progress has been made at Great Salterns towards the provision of adequate sewage disposal, and the proposed number of sites has been reduced from 125 to the more practicable figure of 100. No nuisance occurred from the present cesspool drainage.

Henderson Road site continued its record of popularity and good maintenance, despite some carelessness in the matter of overflowing waste buckets by some of the tenants.

The two other sites, both privately owned, retained their reputation of good management, and an extension of one site to accommodate a further 28 caravans was sanctioned subject to the provision of the necessary water-closet and washing facilities.

The owners of three caravans were requested not to use them again for permanent human habitation.

SHEDS

After the rehousing of their owners or tenants, undertakings were accepted that three sheds in the Milton Locks area would not again be let for permanent habitation.

HOUSEBOATS

The solitary application to station a houseboat on the Eastern Road site received during 1954 was disapproved, and the applicant was accordingly informed that his vessel was unsuitable for reception into these berths.

No contraventions of the berthing legislations were observed throughout the year, but the attention of the Department was drawn to the derelict condition of some w.c.'s adjoining the site, which neighbouring Council tenants averred were being used for improper purposes, allegations which were passed on to the Chief Constable and to the Department having control of the land.

Undertakings were forthcoming from the owners of two houseboats that after the rehousing of their occupiers the vessels would not again be used for permanent human habitation.

NUISANCES FROM DEPOSITS, DUST, SMELLS, ETC.

Prior to World War II deposits of unwanted material on open spaces were infrequent, and usually confined to the outskirts of the City, where occasionally the sudden appearance of an insanitary mattress or the carcase of some dog or cat provoked complaint. With World War II and the rush of vacant lots created throughout the City, every conceivable type of deposit has been made on these spaces.

Dumping of organic and other matter in the vicinity of the Charlotte Street market area caused great concern. A survey showed that a derelict gymnasium was used as a depository and, with the co-operation of the Cleansing and Haulage Department, this was cleared. Stall and store owners in the area of the market were circularised and requested to provide sanitary dustbins. The satisfactory response to this approach has brought about a vast improvement which surveillance up to date has maintained.

Nuisances from coal dust were investigated at Rudmore Wharf and the offending firm has since used every endeavour and device to prevent recurrence.

A petition presented through a ratepayers' association regarding the existence of an unsightly depot belonging to a general trading firm was followed up in that part which concerned public health. Whilst sympathising with the petitioners in the proximity to their dwelling of such unsightliness and obvious source of noise, it was unfortunately a fact that this aggregation held nothing that could be construed as a public health nuisance.

I have previously commented on the paradox that the public often complain about smells which are innocuous in themselves, but rarely report the source which may be prejudicial to health. This was illustrated by the discovery of a huge uncovered dump of fish offal, bones, bread, etc., in an advanced state of decomposition, following a routine investigation of a bad smell. It is true that meteorological conditions complicate nuisances from smells and the Department is still confronted with the problem of objectionable odours from the processes of a newly-built factory being reported from distant school and dwelling houses, whilst no discomfort is experienced by the factory's next-door neighbour, a private resident. Experiments with filters are proceeding, the management being as anxious to eliminate cause for complaint as is this Department.

The mysterious rain of oil causing damage and discoloration to paintwork in the Copnor area in 1953 was pursued into 1954 by a ratepayers' association requesting an explanation from the Corporation. All suspected sources of blame having been excluded by the City Analyst's report on the samples collected, it could only be replied that the origin of the oil was unknown, the incident being weather-controlled.

Cesspools evacuation, happily soon to become but a memory, was again a matter for complaint during the year.

Completing this miscellany were complaints of such diverse things as a chicken abattoir, fruit from pear trees, cellulose spraying, quenching of boiler rakings, banana storage, telephone kiosks, school garden compost heaps, and one notable objection to premises in which were sheltered horses, pigs, goats, chickens, geese, pigeons and a monkey, and, incidentally, from this minor zoo the Law could secure only the removal of the pigs.

PERSONS INADEQUATELY HOUSED

	1952	1953	1954
(a) Housing applications requested by the Medical Officer of Health for assessment ...	2,963	3,138	2,668
(b) Housing applications referred to the Medical Officer of Health by the City Treasurer for assessment	5,737	6,190	7,000
(c) Housing applications forwarded for investigation prior to allocation	364	1,827	3,335
(d) Housing applications requested for special consideration on grounds of tuberculosis	94	64	50
(e) Housing applications issued to sanitary inspectors	3,784	3,500	3,773
Total number of housing applications dealt with	9,158	11,219	13,053
(Note figure (e) included in (a) and (b))			

The figures shewn in the above table reveal the increase of work in this section, the most remarkable increase being reflected from the acceleration of the building programme in the number of investigations prior to allocation.

The Department has received support from a host of socially-minded individuals and bodies who have drawn attention to urgent cases, which otherwise may have had to undergo the patient sifting of routine.

In the course of the inspections made under this heading, many defects to structure were repaired by notice, and 44 underground rooms were either brought into line with legal requirements or described as unfit for human habitation.

In 20 cases, tenants or owners of property were notified that as a fair procedure no further sub-tenants of theirs would be rehoused.

HOUSING REPAIRS AND RENTS ACT, 1954.

In the autumn of 1954 this controversial piece of legislation made its impact on the Department and at the end of the year 23 certificates of disrepair had been issued.

One application for revocation of a certificate was refused.

IMPROVEMENT GRANTS AND APPLICATION FOR LOANS

Eighteen inspections and 11 visits were made to premises in connection with applications for improvement grants and nine inspections were made for assessment of suitability for loans under Section 4, Housing Act.

EXHUMATIONS

One exhumation was attended by the district sanitary inspector who reported that the stipulations of the Home Office's faculty concerning the hygiene of the removal were observed.

Towards the end of the year the Department was contemplating the prospect of having to supervise mass exhumation from 116 graves, some dating from 1798, on the site of St. Mary's Churchyard, Old Portsmouth. This is contingent upon the proposal to change this site for another, in order to transfer an open space to a more suitable vicinity.

FOOD

EXTRANEOUS MATTER IN FOOD

How misleading the appearance of seemingly obnoxious substances found in food can be is very much appreciated by sanitary inspectors, but is less readily accepted by those members of the public who have made the "discovery". The writer recollects the mystery of the "large black beetle in a bottle of milk" which transpired as a substance fused into the glass bottom of the bottle; likewise, the intriguing "mouse paw" found in a pork pie which the microscope revealed as an ear of wheat. 1954 produced quite a crop of such instances, varying from carbonised sugar and gelatine having all the outward attributes of dirt in rolls and pork pies to that of a clawlike object found in a sausage which proved to be one of the conical papillae found on the tongue and cheek of ox and sheep and on the tongue of the pig.

The enigma of the cockroach allegedly found in a tin of soup was quickly exploded by the laboratory, which found that the insect had not been subject to the high temperature necessary in the sterilising process of the canning prior to sealing. There was, however, no dubiety about the appearance of a cigarette end in bread baked in a scrupulously clean bakery. Similar tobacco found elsewhere led to the conclusion that a workman had thrown the cigarette butt away whilst engaged on alterations to the bakery.

Summarised, complaints in this category resulted in the following action:—

<i>Material or object</i>	<i>Found in</i>	<i>Action taken</i>
Cockroach	Paper container of walnut cream cake	No infestation found, but firm warned against recurrence.
Glass	Bag of sweets	Informal action only.
Rodent hair	Vienna roll	Process investigated, no infestation found. Bakers warned.
Piece of celluloid	Bread	Broken from scraper accidentally. Bakers warned.
Bristle	Bread	Bristle from brush on flour sieve. Bakers warned and precautions taken to prevent recurrence.
Traces of oil	Bread	Process investigated. Special filters fitted. Bakers warned against recurrence.
Traces of oil	Bread	ditto
Oily dough	Bread	ditto
Traces of oil	Bread	ditto
Cigarette end	Bread	Satisfactory explanation, but bakers warned.
Papillae	Sausage	None required
Cockroach	Allegedly in soup	ditto
Carbonised sugar	Rolls	ditto
Carbonised gelatine	Pork pie	ditto

CATERING ESTABLISHMENTS GENERALLY

The sub-standard catering arrangements at a local drill hall were reported to me by a district inspector, who observed them during his evening relaxation. The person accepting responsibility was required to provide protection from contamination for uncovered foodstuffs, to secure an ample supply of hot water and clean tea towels, and to resite one of the bars, the edge of which abutted that of the entrance to the men's convenience.

The frustration experienced in an endeavour to make a cafe situated on Crown property conform with the Act seemed complete when, having pursued the matter, I was informed that the cafe would be demolished to make way for officers' quarters. The layout for development of this scheme was then being considered by the Development Committee, and on acceptance depended the erection of a shop to replace the obsolete premises which are without drainage.

No prosecutions were undertaken in 1954, the policy of gentle correction having been found effective, offending managements responding to a letter pointing out the nature of the infringement and the requisite remedy.

FOOD AND DRUGS ACT, 1938, AND CLEAN FOOD BYELAWS

Pending the naming of the day when the 1954 Act begins its statutory life, the inspectors operated the existing law.

The effect of health education on the general public was apparent in the number of complaints made about food handling in the City, and this vigilance of the citizen enabled action to be taken in a variety of cases, including allegations of micturating in a baker's van, dropping sides of bacon on the footway, carrying bread exposed on a van, and window cleaning internally over unprotected foodstuffs.

All complaints were investigated and except in the first-instanced, which occurred outside the City's boundaries, undertakings not to repeat the offence were given.

Notes of originality were struck by persons applying for premises to be registered under the provisions of the Food and Drugs Act, 1938. One had developed a technique whereby cooked onions could be packaged and kept fresh for a lengthy period, but the proposed "lachrymatory" was in a private dwelling house and did not satisfy the law. Another poser started from a complaint by a business rival anent the storage and selling of fish from a private dwelling house. Investigation shewed that the fish was wrapped in cellophane packets and stored in the refrigerator of an ordinary dwelling house kitchen. As such wrapping constituted a "container of such material and so closed as to exclude all risk of contamination", the provisions of the Act did not apply to the room.

A person wishing to build a smoke chamber for the smoke-curing of fish was interviewed, and in view of the built-up nature of the locality was advised not to proceed with the project, which advice was accepted.

As the complement of staff steadily decreased during the year the surveillance over food premises became increasingly difficult to maintain, and most of the inspectors in their returns commented on their inability to devote as much time as necessary to the routine inspection of food premises.

2,048 inspections of food premises were made and the following contraventions were corrected:—

Uncleanliness of utensils	3
„ „ „ surfaces	13
Uncovered foodstuffs	7
Improper storage of foodstuffs	9
Non-provision of soap and towels	11
„ „ „ „ ablution facilities	11
„ „ „ „ hot and cold water	11
General defects and dilapidations	34
Non-provision of sanitary accommodation	1
Defective w.c's	2
No intervening ventilated space	1
Non-display of notices	14
Presence of mice	1
Dirty, defective or otherwise improperly kept swill bins	5
Presence of accumulations in kitchen	2

FOOD PREMISES IN AREA

During the year I was able to provide the White Fish Authority with up-to-date information on the number of wet and fried fish businesses operating in the City, the district sanitary inspectors having recorded the details during their district inspection.

EDUCATIONAL ACTIVITY

Talks were given by senior members of the staff, on food hygiene, general hygiene and the working of the Department, to such varied audiences as pupil midwives, townswomen's guilds, staffs of catering firms, civil defence personnel, boy scouts, etc.

At the local Ideal Homes Exhibition over 1,000 booklets on food hygiene were given to people interested in the subject.

MANUFACTURE OF ICE CREAM

The note of optimism struck in my last report concerning the elimination of contamination from the ice cream produced by a Portsmouth factory seemed justified at the time of writing, for the inquiry produced evidence involving homogeniser packing, washers behind piston heads and cleansing brushes. From thereon the firm observed a bactericidal and cleansing routine involving pasteurising of all mixes at 180°F for a minimum of twenty minutes, in-plant sterilisation before use, hypochlorite treatment of swabs and brushes prior to and during use, and the fitting of non-absorbent, rubberised chevrons.

Concomitant with these mechanical precautions the staff of the factory scrupulously observed a routine of personal hygiene. The immediate results were gratifying, the combined action producing a satisfactory product. Yet, shortly, despite the fact that the firm apparently adhered to the same method of production, complaints were received from the authorities who were the original complainants, and short of the institution of a full-time inspector in the factory the manufacturers' adherence to the technique could not be proved. However, their co-operation in this most exhaustive research was such as to impress not only the local investigators but also to excite the Ministry's representative. It would be interesting to know of any

parallel inquest, in view of the fact that the efforts made locally have been made without proof that the contamination discovered is dangerous to health or even potentially dangerous, and more especially since the absence of bacteriological standards for ice cream debars any authority from insisting on new plant for scientific day-to-day control. Meanwhile, the Council, having carried out its statutory duties to the full, will continue its surveillance of the product until a satisfactory conclusion is reached.

COOKED MEATS

One application was made for registration of premises used for preparation and manufacture of pickled, potted, pressed or preserved food under Section 14(2) of the Food and Drugs Act, 1938. The premises, being found satisfactory, were duly registered.

OTHER NEW FOOD PREMISES

The end of food rationing terminated the requirement of catering licences but before this event took place the Food Executive Officer had notified me of nine applications for registration. Seven of these were approved after various modifications and one application was withdrawn. One van was also approved.

SUMMARY

Inspections and visits	...	...	...	...	22
Applications referred to the Chief Sanitary Inspector					9
Premises found to be satisfactory			...	...	7
Vans found to be satisfactory			...	...	1
Applications withdrawn	...		...	...	1
					—
					9
					—

IRISH TINNED CREAM

The publication in the Press of the discovery of *salmonella typhi* in 'Galtee' brand Irish tinned cream, following on the radio warning regarding the same product, caused a furore when it was found that this comestible was being sold in the City. First in the Department with a specimen tin was one of the Corporation's employees, who handed in both the morning's paper with the announcement and an unopened tin of this product. He complained that a similar tin had been opened and the contents were noticed to have a bitter taste. Thereafter, a number of enquiries were received and to allay anxiety an announcement in the local Press was made by the Medical Officer of Health who advised the public against consumption of the cream until a further communiqué appeared.

Meanwhile, wholesalers and retailers were advised against releasing stocks and 31 unopened tins were submitted to the Central Public Health Laboratory but no harmful organisms were found in them.

PESTOLOGY

There appeared to be an increase in the flea population of the City and 177 premises were treated by the disinfectors for the eradication of fleas and it was also found necessary to spray the sanitary inspectors' office. Formerly, bugs were the parasites causing the greatest concern to the sanitarian, but this year the parasite "that leapeth by day" has succeeded the "terror that walketh by night".

The ease with which infestation can occur was emphasised by a report from a neighbouring authority that bed-bugs had been noticed by their inspector in the spring mattress of a second-hand bed exhibited for sale. Tracing the origin of this lot to a local auction room it was found that, whereas the vendors scrutinised every article very closely before accepting it for sale, the offending lot had been passed in one particularly hectic period. An undertaking was given that no similar occurrence would take place.

Despite the very wet summer of 1954 ants proliferated and numerous complaints were received; where recognised measures were unsuccessful it was often found that an experimental deterrent, such as ordinary paraffin or a hypochlorite, smeared across the route of the invaders was effective.

Rats, mice, steam fleas, golden spider beetle, moth and moth larvae, carpet beetles and their larvae, meal mites, lice, woodworm, cockroaches were either the subject of complaint or were brought to the Department for identification, but for the second year in succession no ladybird pupae, burying beetles, or summer chafers were suspected of being colorado beetles.

BOARDING HOUSES

Three complaints about one Southsea establishment were received during the holiday season and promptly investigated. The insanitary conditions alleged in the complaints were not substantiated by your inspector, who also reported that the "straw mattresses" to which the boarders had taken exception were in fact hair or spring-interior mattresses.

Such complaints are rare when one considers the thousands of visitors to the City. My comment at the time was "the amount of time which has been spent in the investigation of these several complaints is entirely disproportionate to the value of the information I have been able to obtain."

LAW CHARGES INQUIRIES

The Departmental records were examined 3,144 times during the year on account of legal searches against City property being conveyed to new owners.

CINEMAS

The high standard of maintenance of local cinemas was evident in 1954, the annual certification of the ventilation and sanitary conveniences being achieved in 22 inspections.

SMOKE NUISANCES

Every endeavour was made during the year to remove cause for complaint about the operation of the boilers of a laundry at North End. This installation has been the subject of prolonged investigation and the expert advice and co-operation of the Ministry's Regional Fuel Engineer have been fully used. During one trial stoking period observations shewed that no appreciable amount of smoke was emitted, except briefly during fire-cleaning periods. It was the opinion of the Regional Fuel Engineer that the remedy for any nuisance lay in the hands of the management, but at the end of the year the plant was still exasperating residents in the neighbourhood.

Other laundries contributed to the pollution of the City's atmosphere mostly through temporary troubles which were easily resolved, some by change of fuel.

That the stoking of furnaces so as to prevent smoke nuisance is not an easily acquired art was shewn by the experience of a Southsea bakery staff, members of which operated the plant in turn. The unorthodoxy of their boiler practice led to protests from an adjacent school where a film of oil fuel appeared on glazed surfaces. A letter pointing out the need for correct handling of the plant was appreciated by the management who instructed the staff to fire the ovens correctly. The materialising of more deposits from the same chimney was found to be due to the fact that the flue had not been swept for three years. Annual sweeping of the chimney has now been arranged.

One cinema was warned about the inefficient working of the plant and that the smoke nuisance must not recur.

New factories in the north of the City were responsible for complaints of smoke emission which in varying degrees was found to be due to such factors as teething troubles in new plant, inefficient stoking, freak meteorological conditions, etc.

A complaint somewhat out of the usual run was made by a ratepayers' association, which called attention to the practice of storing soot in a residential district. The soot being transported and stored in bags until removed by a market gardener prevented the existence of a statutory nuisance, and all that could be said was that such storage was not a desirable practice in a residential quarter. 133 observations re suspect chimneys were recorded.

SMOKE ABATEMENT

The publication of the report of the Beaver Committee undoubtedly acted as a spur to public opinion on the question of pollution of the air but the pace at which progress will be made depends largely on the attitude of the Government to the findings of the Committee. Smokeless zones are already in operation in several local authority areas, and at one midland and one northern town there are municipal housing estates in which the use of only smokeless fuel is a condition of tenancy. In the south, one authority has just agreed to a similar scheme.

AIR RAID SHELTERS

One underground shelter was referred to the Department as being a possible source of danger to the public health, but as its condition was due to the public having access to it the matter was diverted to the City Engineer.

Four domestic surface shelters were surveyed for possible removal, but only two were recommended for demolition on the grounds that they were prejudicial to the health of the householders.

HOUSING (HOUSING ACTS), ETC.

1,147 surveys were made of properties either in areas selected or as individual houses.

3 houses were closed in pursuance of an undertaking given by the owners under Section II.

16 Closing Orders were made under Section 10 of the Local Government (Miscellaneous Provisions) Act, 1953.

No dwelling houses were demolished in Clearance Areas.

Sections 9, 10, 11 and 16 of the Act were not operated to render houses fit after the service of formal notices but the following action was taken concerning unfit premises, and basements:—

Properties—owners of which were requested not to relet them after tenants rehoused	19
Letters to owners of properties in which basements were deemed to be “underground rooms”	35
Letters advising owners not to relet sub-standard basements ...	9
Six instances of the rehousing in Portsmouth of tenants or sub-tenants of sub-standard houses in other local authorities occurred and the authorities concerned were notified in order to obviate repetitive cases.	

WATER SUPPLY

The wholesomeness of the City's water supply was never questioned during 1954, the routine sampling in private dwelling houses and in the Water Company's premises giving results consistently high.

REFUSE RECEPTACLES

It is a regrettable fact that I can only repeat my observations of 1953 on the motley containers which the citizens of Portsmouth have come to accept as sanitary refuse bins.

INFECTIOUS DISEASES

The incidence of infectious diseases in the City declined notably in the period covered by this report. Sanitary inspectors made less than half the previous year's total of inquiries into cases and suspected cases of notifiable diseases. The 421 visits paid to homes in endeavours not only to find the origin of infection but to limit the spread of disease also included the follow-up of contacts from other districts and from abroad.

Of the more serious infections, typhoid fever returned to the City, having been absent since 1952. This recrudescence of what was once an endemic disease locally was limited to two cases and defeated every endeavour to trace the source of infection, although at one time a nebulous theory of infected cockles excited the hunt. All contacts were investigated, but, like samples of well water and specimens of shellfish from suspected sources, yielded negative results.

Enquiries into the illness of a two year old child, later established as paratyphoid B., offered better results, two contacts proving positive. The time involved in obtaining exact information regarding the patient's diet, movement and contacts was amply rewarded by the discovery that the “baby-sitter” had had similar symptoms, allegedly after washing the infected child's napkins. Investigation of this second patient's contacts brought to light a daughter who was excreting the causal organism. The epidemic possibilities, had not this third and apparently symptomless case been discovered, were incalculable, for her everyday work in a local pastry-cooks consisted of filling cream buns and icing other confections. The investigation of the whole of this firm's staff proved abortive and other leads failed.

The one outbreak of food poisoning was confined to an institution and the only part the Department played was that of examining the premises from which the meat, found by the laboratory to be contaminated with *Cl. welchii*, had originated. These conditions were such as to put the firm's supplies beyond suspicion.

Meticulous examination of the history of movement and diet of *salmonella typhi murium* cases is now a routine practice, but this application to the 37 cases of 1954 offered nothing spectacular. Foci of infection were never found, the only discoveries being the inevitable and allegedly symptomless excretor of the organism either from the members of the family or some close contacts. Food submitted for bacteriological examination included shellfish, cream buns, sausages, sheep's brains, meat pies, toffee apples, Government dried milk, flour, and liquid eggs, from all of which no pathogens were isolated. The possibility of infection by animals led to the examination of droppings from mice, dogs, and budgerigars and, in connection with the incidence of the disease in a families unit, the cadavers of mice recovered from the unit's refuse disposal arrangements were submitted to the laboratory without confirming the theory of murine infection.

It was a quiet year in so far as concerned the number of contacts entering the City, and, although persons lately in danger of contracting such diseases as smallpox, poliomyelitis and sonné dysentery came within the Department's purview, no Portsmouth cases were attributable to these entries.

Premises from which patients suffering from infections had been removed were sprayed with a bactericide as a routine precaution and, as in previous years, many requests were made by the public to extend this prophylaxis to other diseases, such as cancer. The Departmental disinfectors, besides ably carrying out this measure in some 450 rooms, also superintended the disinfection of 92 public library books received from infected sources, and removed 91 mattresses for fumigation.

SUMMARY OF WORK CARRIED OUT

INSPECTION OF PREMISES

Dwelling houses	...	...	...	...	...	...	...	6,969
New dwelling houses	...	...	...	...	...	...	...	1,484
Boarding houses	...	...	...	...	...	...	...	6
Common lodging houses	...	...	...	...	...	...	...	3
Tents, vans, sheds, caravans, camping sites	...	...	...	...	...	...	...	153
Verminous premises	...	...	...	...	...	...	...	343
Houseboats	...	...	...	...	...	...	...	32
Offensive trades	...	...	...	...	...	...	...	10
Smoke, chemical and colour tests to old drains	...	...	...	...	...	...	...	334
Chemical and other tests to new drains	...	...	...	...	...	...	...	230
Housing Act, 1936	...	...	...	...	...	...	...	1,147
Housing Act, 1936, permitted number survey	...	...	...	...	...	...	...	38
Underground rooms	...	...	...	...	...	...	...	104
Power factories	...	...	...	...	...	...	...	779
Non-power factories	...	...	...	...	...	...	...	111
Work places	...	...	...	...	...	...	...	16
Outworkers' premises	...	...	...	...	...	...	...	43
Rag Flock Act, 1951	...	...	...	...	...	...	...	27
Shops Act, 1950	...	...	...	...	...	...	...	214
Town and Country Planning Acts, 1940/48	...	...	...	...	...	...	...	50
Cinemas, theatres, circuses, fun-fairs, and other places of entertainment	...	...	...	...	...	...	...	24
W.D. buildings and sites	...	...	...	...	...	...	...	16
Public conveniences	...	...	...	...	...	...	...	6
Air raid shelters	...	...	...	...	...	...	...	6
Rodent control (other than included in rodent control report)	...	...	...	...	...	...	...	260
Beaches re flies	...	...	...	...	...	...	...	14
Nursery schools and child minders, etc.	...	...	...	...	...	...	...	3
Nursing homes	...	...	...	...	...	...	...	1
Swimming pools	...	...	...	...	...	...	...	65
Building sites	...	...	...	...	...	...	...	5
Re animals	...	...	...	...	...	...	...	1
Re accumulations	...	...	...	...	...	...	...	7
Re sewage disposal	...	...	...	...	...	...	...	16
Improvement grants	...	...	...	...	...	...	...	18
Loans, Sections 4, Housing Act	...	...	...	...	...	...	...	9

Rent restriction certificates	...	...	...	...	...	...	...	23
Aged persons' homes	...	...	...	...	...	...	...	3
Miscellaneous	...	...	...	...	...	...	...	34
Ships	...	...	...	...	...	...	...	148
								<hr/> 12,752 <hr/>

RODENT CONTROL

Number of complaints received	...	...	...	1,794
Number of premises visited during survey	...	...	...	3,163
				<hr/>
Total			...	4,957
Number of premises treated by Local Authority	...	...	...	2,483

Of the above 2,483 premises treated, 1,976 were private dwelling houses, 416 business premises and 89 Local Authority premises.

Included in the business premises are 18 naval establishments, and two agricultural properties. Of the 2,483 premises treated, 10 were major infestations (rats), 1,059 minor infestations (rats) and 1,378 minor infestations (mice).

The City's sewerage system was treated twice during the year and of the 4,252 manholes in the system 3,579 were baited and excellent results obtained.

Refuse tips, sewage disposal works, docks and foreshores were all treated during the year.

Treatments were carried out for the destruction of rats and mice on the British Railways system in the City and good results obtained.

The contract between the Local Authority and the Director of Navy Contracts for the extermination of rats and mice on Admiralty lands and properties within the City boundary continues in operation.

The poison "Warfarin", which has proved extremely successful, is now extensively used on all properties requiring treatment, with the exception of the sewerage system and open positions where its use is impracticable owing to dampness.

MOSQUITO CONTROL

The low-lying areas and mosquito breeding places within the City have continued to be under surveillance of the staff of the former British Mosquito Control Institute, in accordance with the agreement with Havant and Waterloo U.D.C., together with the active co-operation of a member of my staff. Oiling and ditching have been regularly carried out and the breeding of mosquitoes reduced to a minimum.

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951

33 inspections were made to the one premises licensed and the 23 registered under the above Act.

REPORT ON CLEANSING

I am indebted to the Acting Manager of the Cleansing and Haulage Department for the following report on the Cleansing Service during the year:—

“Refuse collection continued throughout the year at weekly intervals, and a total of 24 refuse collection vehicles collected some 78,000 tons of refuse from 69,000 premises. In addition, 1,250 tons of trade refuse were also removed.

At the controlled tips 80,000 tons of refuse were received during the year. A small area of low-lying land at Eastney and another adjacent to the Eastern Road were filled in. A further area at Great Salterns was scheduled for tipping where work is now proceeding with the aid of a bulldozer, two excavators and a tractor.

Of the 210 miles of streets in Portsmouth to be swept, the main roads continue to receive daily attention from the street orderlies. The two mechanical sweepers and the electric controlled sweepers truck continue to give satisfaction. In addition to road sweeping, 100 men were responsible for keeping the roads safe in times of bad weather. The gullies and cesspits within the area continue to receive regular attention, but extra work was thrown on the Department with the erection of new factories at Cosham.

The salvage activities of the Department continued satisfactorily during the year, and in two months of the year records were broken for the sale of waste paper, when the total tonnage sold passed the 200 mark. The market for salvage material remained steady.”

PORT HEALTH AUTHORITY

Public Health Department,
Municipal Offices,
1 Western Parade,
Portsmouth.

To the Chairman and Members of the Port Health Authority.

Ladies and Gentlemen,

I have the honour to present my Report on the work of the Port Health Authority of Portsmouth during the year 1954.

SECTION I—STAFF

No change.

SECTION II—AMOUNT OF SHIPPING ENTERING THE DISTRICT DURING THE YEAR

TABLE B

Ships from	Number	Tonnage	Number Inspected		Number of ships reported as having, or having had during the voyage, infectious disease on board
			By the Medical Officer of Health	By the Sanitary Inspector	
Foreign Ports ...	608	174,116	—	49	—
Coastwise* ...	2,797	500,707	—	99	—
Total ...	3,405	674,823	—	148	—

* Includes local traffic between Southampton, Isle of Wight and Portsmouth.

SECTION III—CHARACTER OF SHIPPING AND TRADE DURING THE YEAR

TABLE C

There was no passenger traffic during the year.

Cargo Traffic. The principal imports were coal, cement, stone, oil, timber, glassware, building materials, tomatoes, onions, potatoes, cauliflower, citrus fruits, apples, pears, peaches, nuts, chocolate and general cargo traffic, from France, Italy, Holland, Belgium, Germany, Sweden, Finland, Norway, North Africa, Spain and Channel Islands.

The principal exports were pitch, machinery, scrap iron, fertilisers, oxide, barley and general cargo.

SECTION IV—INLAND BARGE TRAFFIC

There is no inland barge traffic.

SECTION V—WATER SUPPLY.

No change.

SECTION VI—PUBLIC HEALTH (SHIPS) REGULATIONS, 1952

No change.

SECTION VII—SMALLPOX

- (1) Cases of smallpox are removed to the smallpox hospital at Crabwood, near Winchester.
- (2) Cases are conveyed by the Portsmouth Municipal Ambulance and Medical Car Service, the vaccinal state of the ambulance crews being: 28 vaccinated in 1954, 1 in 1952, 5 in 1951, 4 not known.
- (3) The smallpox consultant is Dr. I. M. McLachlan, Physician Superintendent, Infectious Diseases Hospital, Portsmouth (Tel. 2046).
- (4) Facilities for laboratory diagnosis of smallpox exist, by arrangement with the Portsmouth and Isle of Wight Area Pathological Service, at the Central Laboratory, Infectious Diseases Hospital, Portsmouth.

SECTION VIII—VENEREAL DISEASE

No change.

SECTION IX—CASES OF NOTIFIABLE AND OTHER INFECTIOUS DISEASES ON SHIPS

TABLE D

Category	Disease	Number of cases during the year		Number of ships concerned
		Passengers	Crew	
Cases landed from ships from foreign ports	—	—	—	—
Cases which have occurred on ships from foreign ports, but have been disposed of before arrival	—	—	—	—
Cases landed from other ships ...	—	—	—	—

SECTION X—OBSERVATIONS ON THE OCCURRENCE OF MALARIA IN SHIPS

No malaria occurred in ships during the year.

SECTION XI—MEASURES TAKEN AGAINST SHIPS INFECTED WITH OR SUSPECTED FOR PLAGUE

No plague or suspected plague occurred in ships during the year.

SECTION XII—MEASURES AGAINST RODENTS IN SHIPS FROM FOREIGN PORTS

- (1) Vessels arriving from abroad are examined periodically by the Port Health Inspector. Rat disinfestation is carried out by the Rodent Control Section of the Health Department in the port area.
- (2) Bacteriological or pathological examination of rodents can be carried out at the Central Laboratory, Infectious Diseases Hospital; none was examined during the year.

- (3) The Port is not approved for the deratting of ships and, by agreement with Southampton Port Health Authority, this is undertaken by them. Five certificates were issued in respect of local coastwise vessels during the year.
- (4) When necessary, rat guards are placed on ropes between ships and quays.

TABLE E

Rodents destroyed during the year in ships from foreign ports

<i>Category</i>								<i>Number</i>
Black rats	—
Brown rats	—
Species not known	—
Sent for examination	—
Infected with plague	—

TABLE F

Deratting Certificates and Deratting Exemption Certificates issued during the year for ships from foreign ports.

(Not applicable)

SECTION XIII—INSPECTION OF SHIPS FOR NUISANCES

TABLE G

Inspections and Notices

Nature and Number of Inspections	Notices served		Result of serving Notices
	Statutory Notices	Other Notices	
Primary, 129	—	25	—
Others, 19	—	—	21 complied with
Total 148	—	25	—

SECTION XIV—PUBLIC HEALTH (SHELLFISH) REGULATIONS, 1934 & 1948

No change.

SECTION XV—MEDICAL INSPECTION OF ALIENS (APPLICABLE ONLY TO PORTS APPROVED FOR THE LANDING OF ALIENS)

No change.

SECTION XVI—MISCELLANEOUS

No change.

I desire to express my thanks to the Queen's Harbour Master and H.M. Collector of Customs and their staff for their cordial co-operation and valuable assistance during the year, and to record my appreciation of the service rendered by the Port Health Inspector.

I have the honour to be, Ladies and Gentlemen,

Your obedient servant,

T. E. ROBERTS,

*Medical Officer of Health,
City and Port of Portsmouth.*

11th March, 1955.

THE PUBLIC ANALYST'S REPORT

THE PUBLIC ANALYST'S DEPARTMENT,
TRAFALGAR PLACE,
CLIVE ROAD,
PORTSMOUTH.

To the Chairman and Members of the Health and Housing Committee.

I have the honour to submit my Annual Report on the work carried out in my Department during the year 1954.

The total number of samples submitted for examination was 3,404. These may be summarised as follows:—

Food and Drugs Act	...	...	...	1,945
Designated Milk	...	...	...	488
Ice Cream (Hygienic quality)	...	...	...	119
City Water	...	...	...	35
Swimming Bath Water	...	...	...	63
Fertilisers and Feeding Stuffs Act	...	...	...	5

SAMPLES EXAMINED FOR:—

Borough of Gosport	...	...	...	159
Isle of Wight County Council	...	...	...	148
Other Local Authorities	...	...	...	50
Corporation Departments	...	...	...	220
Miscellaneous	...	...	...	172
TOTAL				3,404

Of the 1,945 samples purchased in the City of Portsmouth and submitted for analysis under the Food and Drugs Act, 139 (equal to 7·2%) were found to be adulterated, incorrectly labelled or otherwise unsatisfactory.

I am glad to take this opportunity of expressing my appreciation of the efficient and loyal service of the technical and clerical staff and the valuable co-operation of the Sampling Officer.

I am, Mr. Chairman and Members,

Your obedient servant,

A. L. WILLIAMS,
Public Analyst.

Nature of Sample	Number Examined	Number Genuine	Number Irregular
Foods			
Milk	804	725	79
Alcoholic Beverages	22	22	—
Butter	49	49	—
Beef Suet	25	24	1
Baking Powder	10	10	—
Cake and Pudding Mixtures	6	6	—
Cake	2	—	2
Canned Foods	96	79	17
Cereals	27	24	3
Cheese	46	46	—
Chutney and Sauce, etc.	23	23	—
Condensed Milk	15	15	—
Coffee, Coffee and Chicory Preparations	20	18	2
Cocoa and Cocoa Preparations	20	20	—
Coconut	3	3	—
Crystallized Fruit	18	15	3
Cream, and Sterilised Cream	19	18	1
Custard and Blancmange Powder	7	7	—
Dressed Crab	3	3	—
Dried Fruit	13	13	—
Dried Herbs	23	21	2
Dripping	3	3	—
Fish Cakes	6	6	—
Fruit Curd	12	12	—
Fruit Flavoured Milk	2	—	2
Gelatine	5	5	—
Golden Syrup	3	3	—
Gravy Powder	5	5	—
Ground Almonds	7	7	—
Honey	4	4	—
Ice Cream	23	23	—
Ice Lolly	11	11	—
Jam and Marmalade	44	43	1
Kidney Beans	1	1	—
Lard and Cooking Fat	49	49	—
Margarine	53	53	—
Marzipan	10	8	2
Mincemeat	17	16	1
Minced Chicken	1	—	1
Meat Pie	1	1	—
Mustard	1	1	—
Oranges... ..	2	2	—
Paste, Meat and Fish	14	14	—
Peanut Butter	1	1	—
Pepper	16	16	—
Processed Cheese and Spread	6	3	3
Rennet	1	1	—
Sausages	29	24	5
Savoury Spread	2	2	—
Soft Fruit Drinks	35	35	—
Spice, Mixed	12	12	—
Soya Flour	1	1	—
Self Raising Flour	12	12	—
Starches	5	5	—
Stuffing	7	7	—
Sugar	48	48	—
Sugar Confectionery	25	25	—
Table Jelly and Crystals	31	25	6
Tea	52	51	1
Uncooked Pastry	1	1	—
Vinegar	4	4	—
Total Foods	1,813	1,681	132

Nature of Sample						Number Examined	Number Genuine	Number Irregular
Drugs								
Antiseptic Oil	...	...	...	...	...	1	1	—
Aspirin Tablets	...	...	...	...	...	14	14	—
Bicarbonate of Soda	...	...	...	...	...	5	5	—
Boric Acid Ointment	...	...	...	...	...	4	4	—
Boracic Crystals	...	...	...	...	...	1	1	—
Camphorated Oil	...	...	...	...	...	6	6	—
Castor Oil	...	...	...	...	...	1	1	—
Cod Liver Oil	...	...	...	...	...	4	4	—
Cod Liver Oil and Malt	...	...	...	...	...	7	7	—
Calcium Lactate Tablets	...	...	...	...	...	2	2	—
Calamine Lotion	...	...	...	...	...	5	5	—
Cough Mixture	...	...	...	...	...	7	7	—
Cough Pastilles	...	...	...	...	...	5	4	1
Cream of Magnesia	...	...	...	...	...	1	1	—
Epsom Salts	...	...	...	...	...	1	1	—
Formamint Tablets	...	...	...	...	...	2	2	—
Glucose Tablets	...	...	...	...	...	2	2	—
Glycerin	...	...	...	...	...	4	1	3
Glycerin, Lemon and Ipec.	...	...	...	...	...	4	4	—
Glycerin of Thymol	...	...	...	...	...	5	4	1
Hydrogen Peroxide	...	...	...	...	...	6	6	—
Indigestion Tablets	...	...	...	...	...	2	2	—
Liquid Paraffin	...	...	...	...	...	1	1	—
Olive Oil	...	...	...	...	...	5	5	—
Petroleum Jelly	...	...	...	...	...	2	2	—
Raspberry Vinegar	...	...	...	...	...	3	3	—
Seidlitz Powder	...	...	...	...	...	6	5	1
Stomach Digestive Powder	...	...	...	...	...	1	1	—
Sulphur Ointment	...	...	...	...	...	4	4	—
Syrup of Squills	...	...	...	...	...	4	3	1
Tannic Acid Jelly	...	...	...	...	...	5	5	—
Vegetable Laxative Tablets	...	...	...	...	...	2	2	—
Wintergreen Ointment	...	...	...	...	...	4	4	—
Zinc and Castor Oil Cream	...	...	...	...	...	6	6	—
Total No. Drugs ...						132	125	7

	Milks	Other Foods	Drugs	Total Foods and Drugs
Number Examined ...	804	1,009	132	1,945
Number Irregular ...	79	53	7	139
Percentage Irregular ...	9·8	5·3	5·3	7·2

CHANGES IN LEGISLATION

FOOD AND DRUGS AMENDMENT ACT 1954

Modern conditions have demanded this Amendment of the principal Act of 1938 so as to provide more efficient control of the conditions under which food is manufactured, prepared and sold. Flexibility of enforcement is given by placing regulation-making powers in the hands of the Ministry. Hygiene will receive special attention and it is expected that a start may be made to deal with the modern problem of the increasing use of chemical additions in the food industry.

The Act gives a permanent place in our legislation for those powers which were included in Defence Regulations during the war and which have proved their worth, e.g. power to deal with misleading labelling and advertising. A large proportion of a Public Analyst's duties today are concerned with checking the claims for nutritional and dietary value which are made on labels and advertisements. One section of the Act makes it clear that a substance which resembles cream in appearance must not be described as cream unless it consists of genuine dairy cream. The Amendment Act clarifies sampling procedure.

THE FOOD STANDARDS (MARGARINE) ORDER 1954

When Margarine was de-controlled the Government decided that, in the interests of the health of the population, all Margarine must contain the nutritionally important vitamins A and D. This Order prescribes the minimum quantity of these vitamins and also prescribes in great detail the method of determination which is to be used by the Analyst for enforcement. Margarine and butter contain about the same energy value in the form of fat but without the essential vitamins A and D, margarine would be an inadequate substitute for butter and medical and nutritional authorities regard this Order as a most important health measure.

THE MINERAL OIL IN FOOD (AMENDMENT) ORDER 1954

Although it is established in the principal Order that Mineral Oil is an undesirable ingredient in food, it is accepted that there is little danger to health if traces are permitted in certain foods. Accordingly this amending Order allows small quantities of mineral oil of the order of 0.1 to 0.5% in dried fruit and citrus fruit where it is used as a deterrent to pests, and in foods which may acquire traces from the use of mineral oil as a lubricant during manufacture.

FOOD STANDARDS COMMITTEE RECOMMENDATIONS

During 1954 the Food Standards Committee has made recommendations regarding (a) the maximum contamination from zinc and lead in foodstuffs and (b) the use of antioxidants for the purpose of retarding the development of rancidity in foods.

These recommendations do not have the force of law but they assist both local authorities and the trade to ensure that modern progress in food manufacture does not disregard the health of consumers.

MINISTRY OF FOOD CIRCULARS

Circular MF2/54 states that for the guidance of local authorities, the Ministry consider that the sale of any food containing Thiourea (a chemical fungicide used on citrus fruit) would be a contravention of the Preservative Regulations.

Circular MF3/54 modifies the Code of Practice which governs the use of the description "Cream Soup". This description implies that the soup contains at least $3\frac{1}{2}\%$ of edible fat. Alternatively the proportion of fat may be as low as 3% if half of it is butter fat or as low as $2\frac{1}{2}\%$ if it consists wholly of butter fat.

MILK

Milk is examined in this laboratory from two aspects—chemical and bacteriological. Chemical composition seeks to disclose added water, added preservative and added colouring matter, all of which are prohibited; in addition, the chemical composition indicates any deviation from average quality from a nutritional point of view.

Testing for hygienic quality includes an examination which will indicate whether the milk contains excessive numbers of bacteria sufficient to impair the keeping quality—and an indication of the efficiency of the process of pasteurisation and sterilisation which, when carried out in the prescribed manner, guarantees that milk is free from the organisms of tuberculosis and other pathogenic diseases.

CHEMICAL EXAMINATION

All the 804 samples of milk which were examined in 1954 were free from added colour and preservative.

The source of the samples was as follows:—

420 from retailers selling to the public

322 from farmers delivering to local dairies

62 from deliveries of one-third pint bottles to various schools

All the school milks were of satisfactory quality and only 2 out of the 420 bottles of milk from dairymen contained added water. The proportion of water was 3% and it seems likely that it originated from careless manipulation of the dairy plant.

Three farmers were found to be supplying milk containing added water to local dairies. In one case the amount was appreciable, as much as 8% in one churn. Subsequently, a leak in the cooler was found. Small amounts of 1 to 3% of water were found in the other cases.

53 samples from farmers failed to reach the presumptive limit of $3\cdot0\%$ of fat. These samples came from 14 different herds and represented the morning milking. The corresponding evening milkings were rich in fat so that when the whole consignment of each herd was mixed together a satisfactory bulked milk was obtained.

Milk low in solids-not-fat was recorded in 39 samples but the low quality was shown to be due to the cows and not to added water. This inferior quality is mainly due to the fact that there is no official system of payment according to quality and consequently farmers are more interested in quantity than quality.

However, the average quality of the mixed milk supplied to the public is being maintained and, in this area, there is no evidence to suggest that inferior herds are increasing. The average composition is shown by the following table.

AVERAGE COMPOSITION OF MILK SOLD TO THE PUBLIC
(CHANNEL ISLAND MILK EXCLUDED)

Month				% Fat	% Solids-not-Fat	% Total Solids	No. of Samples examined
January	...	...	...	3.78	8.63	12.41	28
February	...	...	...	3.77	8.65	12.42	23
March	...	...	...	4.08	8.58	12.66	33
April	...	...	...	3.57	8.60	12.17	32
May	...	...	...	3.18	8.88	12.06	40
June	...	...	...	3.60	8.80	12.40	40
July	...	...	...	3.58	8.71	12.29	40
August	...	...	...	3.77	8.44	12.21	40
September	...	...	...	3.73	8.72	12.45	35
October	...	...	...	3.90	8.81	12.71	30
November	...	...	...	4.05	8.78	12.83	40
December	...	...	...	4.12	8.70	12.82	15
Average 1954	...	...	...	3.76	8.69	12.45	396
„ 1953	...	...	...	3.71	8.66	12.37	365
„ 1952	...	...	...	3.76	8.70	12.47	391

CHANNEL ISLAND MILK.

In an indirect way a system of quality payments does apply in the case of Channel Island Milk. The basis of the scheme is the breed of the cow together with a definite figure of 4.0% as the minimum fat content. The premium payments are not paid to the farmer unless the herd is wholly Channel Island cows and the mixed consignment of milk attains the required standard for fat. The cost is eventually borne by the consumer who pays an additional penny a pint for this type of milk.

86 samples of this milk representing the pint bottles sold by dairymen to the public were examined in 1954. One sample was below standard. A further 72 samples were taken from the churns on delivery to the dairies from farmers. 17 samples were below standard. In most cases the complete consignment of morning and evening milk was satisfactory. The consignments of two farmers however, were sub-standard after bulking and these cases were referred to the Milk Marketing Board who make the payments to the farmers.

On average, Channel Island Milk contains appreciably more cream than ordinary milk, as shown by the following table

					Average Fat per cent	
					Channel Island Milk	Ordinary Milk
1954	...	...	...	...	4.44	3.76
1953	...	...	...	...	4.50	3.71

HYGIENIC QUALITY OF MILK

It is illegal to sell milk in Portsmouth which has not been pasteurised or sterilised, unless it has been produced from a T.T. herd. In fact, no raw milk is on sale in the City, by far the greater proportion being pasteurised.

Of the 488 samples examined by the official tests, 3 failed to satisfy the phosphatase test, which checks the efficiency of pasteurisation and 1 failed to satisfy the methylene blue test, which indicates the keeping quality. All these unsatisfactory samples were followed up and with the willing co-operation of the dairymen concerned, the faults causing the failure were traced.

ICE CREAM

NUTRITIVE QUALITY

The minimum legal standards for ice cream are 5% of fat, 7½% of milk solids-not-fat and 10% of sugar. Twenty-three samples were examined in 1954 and all contained more than 10% of sugar. The following table summarises the results for fat:—

Fat per cent				No. of Samples
Under 5·0	...	...	...	0
5·0—7·4	...	...	...	3
7·5—9·9	...	...	...	2
10·0 and over	...	...	...	18
Total				23
Average 11·3%				
Legal minimum 5·0%				

These figures suggest that, in order to satisfy public demand, manufacturers find it necessary to double the legal minimum standard for fat. There is an implication that the 5·0% standard for fat is very low and unrealistic and a manufacturer who approaches it will not meet with much success in this highly competitive business.

Some Agricultural organisations take the view that the consumer is being “led up the garden path” concerning the composition of ice cream. Farmers associations would like to see more fresh milk and dairy cream used in its manufacture and express doubts on whether consumers realise that most of the fat content in ice cream is now derived from margarine.

Reports indicate that in some areas, real cream ices made with fresh dairy cream are being sold, but they have not yet appeared in Portsmouth. In my view this superior product requires an attractive description which would encourage the consumer to pay the inevitably higher price. Alternatively, this genuine dairy product might be described as “Cream Ice” and the existing grade made with margarine might be described as “Ice Kreme”.

HYGIENIC QUALITY

An improvement in hygienic quality of ice cream has again been noticed during 1954, as shown by the examination of 119 samples. The table summarises the results for the last 3 years and indicates that the improvement over 1953 is largely due to a decrease in the number of borderline samples (Grade 3). The unsatisfactory samples (Grade 4) have remained virtually the same at approximately 1 in 20 samples.

Continuous vigilance is necessary to maintain the high standard and manufacturers and retailers alike willingly co-operated during 1954 in cases where improvement was possible.

		1954	1953	1952
Satisfactory	Grade 1	69%	50%	36%
	„ 2	22%	30%	26%
		} 91%	} 80%	} 62%
Inferior	„ 3	5%	14%	18%
Unsatisfactory	„ 4	4%	6%	20%

SAMPLES OTHER THAN MILK NOT IN ACCORDANCE WITH STANDARD

No.	Nature of Sample	Formal Informal Private	Nature of Offence	Observations
E282	Pea Flour	I	Contaminated with mould	Stock destroyed
E151	Beef Sausages	I	Contained 150 p.p.m. undeclared SO ₂ preservative	Caution
E153	Beef Chipolata Sausages	I	Contained 150 p.p.m. undeclared SO ₂ preservative	Caution
E542	Pork Sausages	I	Contained 180 p.p.m. undeclared SO ₂ preservative	Caution
E547	Pork Sausages	I	Contained 140 p.p.m. undeclared SO ₂ preservative	Caution
E1484	Beef Chipolata Sausages	I	Contained 160 p.p.m. undeclared SO ₂ preservative	Caution
E22	Creme Tomato Soup	I	Fat 1.2% instead of not less than 3.5%	Repeat sample unobtainable
E18	Cream of Tomato Soup	I	Fat 0.7% to 1.5% instead of not less than 3.5%	Claimed to be due to a misinterpretation of Code of Practice. Manufacturer and retailers informed that retail stocks must be sold as 'Soup'
E264	Cream of Tomato Soup	I		
E265	Cream of Tomato Soup	I		
E309	Cream of Tomato Soup	I		
E310	Cream of Tomato Soup	I		
E361	Cream of Celery Soup	I		
E362	Cream of Celery Soup	I		
E363	Cream of Asparagus Soup	I		
E364	Cream of Asparagus Soup	I		
E502	Cream of Asparagus Soup	I		
E504	Cream of Pea Soup	I		
E505	Tomato Creme Soup	I	Fat 3.0% instead of not less than 3.5%	Packer cautioned
E1172	Cream of Tomato Soup	I	Not "Cream" Soup. Fat content 1.2% to 3.4%. Label offence. List of ingredients used the description "Dried Milk" for Dried Skimmed Milk	Explanation accepted. Caution. Full Cream Dried Milk to be used in future
E1186	Cream of Tomato Soup	I		
E1417	Cream of Tomato Soup	F		
E1418	Cream of Tomato Soup	F		
E914	Pearl Barley	I	Contaminated with mites	Stock destroyed
E1018	Pearl Barley	I		

No.	Nature of Sample	Formal Informal Private	Nature of Offence	Observations
E207	Shredded Beef Suet	I	Contained 18% of excess cereal	Packer cautioned. Subsequent samples satisfactory
E657	Real Minced Chicken	I	False label. Labelled 100% Chicken. Contained 75% Chicken plus 25% extraneous water	Label amended. Caution
E982	Cream—prepacked	I	No designation of contents. No name and address of packer	Packer cautioned
E858	Fruit Flavoured Milk	I	"Glucose" used as designation for Liquid Glucose in list of ingredients	New labels to be printed with "Liquid Glucose"
E859	Fruit Flavoured Milk	I		
E900	Ham Cheese Spread—prepacked	I	Incomplete list of ingredients. Emulsifying salts not declared. Designation "Ham Cheese Spread" does not fully inform purchaser that Ham is present as a flavouring only	Label amended to include Emulsifying Salts. Designation changed to 'Cheese Spread with Ham'
E955	Jelly Crystals	I	Total Sugars 73.0% to 79.4% instead of not less than 84%	Explanation accepted. Caution
E1084	Jelly Crystals	I		
E1273	Jelly Crystals	I		
E1274	Jelly Crystals	I		
E1275	Jelly Crystals	I		
E1276	Jelly Crystals	I		
E1022	Processed Cheddar Cheese—prepacked	I	Label offence. No address of packer	Packer has undertaken to amend label
E1061	Processed Cheese Spread—prepacked	I	Label offence. List of ingredients omitted	Packer has undertaken to amend label
E1293	Plum and Raspberry Jam	P	Insect infestation on the greaseproof paper cover which protected the surface of contents	Retailer's stock examined and found to be satisfactory
E1205	Coffee and Chicory Essence	I	Benzoic Acid 280 p.p.m. Not declared on the label	Explanation accepted. Caution
E1292	Coffee and Chicory Essence	I		
E1347	Glacé Cherries—prepacked	I	Label offence. Incomplete list of ingredients. Liquid Glucose and colour not declared	Label amended
E1360	Glacé Cherries—prepacked	I	Label offence. Description "Glucose" used for Liquid Glucose	Label amended

No.	Nature of Sample	Formal Informal Private	Nature of Offence	Observations
E1615	Chocolate Rolls	I	Inedible due to rancidity —mould present	Due to faulty stor- age by retailer. Caution
E1543	Dried Herbs— parsley— prepacked	I	No name and address of packer — no weight stated. One sample contained 1.5% excess sand and grit	Old stock of un- known age
E1544	Dried Herbs— sage—prepacked	I		Withdrawn from sale
E1770	Mincemeat	I	Label offence—no address of packer or registered Trade Mark	Packer cautioned
E1766	Marzipan— prepacked	I	Label offence—no list of ingredients given	Packer undertook to amend label
E1722	Cut Mixed Peel— prepacked	I	Label offence—no list of ingredients	Packer undertook to amend label
E1716	Tea—prepacked	I	Label offence—no address of packer or registered Trade Mark	Packer undertook to amend label
E1831	Marzipan— prepacked	I	Label offence—"Glucose" used as designation of an ingredient which was Liquid Glucose	Packer undertook to amend label
E1928	Scotch Cake	I	False advertisement. Claimed to be "made with butter." The fat in the sample consisted of 10% butter fat and 90% margarine fat	Formal sample to be taken
E296	Glycerin B.P.	I	Contained 2.5% to 3.8% excess water	Stock withdrawn from sale
E358	Glycerin B.P.	I		
E359	Glycerin B.P.	I		
E678	Syrup of Squills	I	Deficient 25% of the mini- mum amount of acetic acid prescribed by B.P. formula	Caution
E687	Compound Glycerin of Thymol B.P.C.	I	Deficient 82% of the mini- mum amount of gly- cerin prescribed by B.P.C. formula	Caution
E1453	Extra Strong Seidlitz Powder	I	3 out of 4 Blue Papers excess in weight. 6.8% to 8.8% in excess of correct amount. Reas- onable limit is 5%	Caution
E1710	Chessies Tablets	I	Recommended as a medi- cine. Deficient of 86% of the volatile oils claimed in the formula on the label	Manufacturer cautioned

ADULTERATED AND UNSATISFACTORY SAMPLES

CREAM SOUPS. 60 samples representing 15 different brands were examined and 4 brands were found to be incorrectly described. They contained insufficient fat to justify the description "Cream" Soup.

One manufacturer explained that he had mis-interpreted the requirements for fat content and could not recall the unsatisfactory batches which were in various stages of distribution. He was informed that sales in this area could only be permitted if the purchaser was informed that the soup was not a true "Cream" soup.

Samples of another brand showed excessive variation in fat content from can to can indicating faulty manufacturing technique. The manufacturer undertook to amend his procedure to prevent separation of fat during preparation.

SAUSAGES. Since Sausages were freed from price control in 1953, Portsmouth samples have shown no evidence of a significant deterioration in quality, as measured by meat content. During 1954 all the thirteen samples of beef sausage had a meat content in excess of the standard of 50% which was official under price control.

Most of the sixteen samples of pork sausage satisfied the standard of 65% meat. The average was 68% meat and the lowest figure was 62%.

In 5 cases, Sausages were sold containing undeclared sulphur dioxide preservative, contrary to the Preservative Regulations. The retailers were cautioned.

JELLY CRYSTALS. All three packets enclosed in a carton of jelly crystals were found to be deficient in sugar, the gelatine content being higher than normal. The manufacturer stated that he prepared this product specially for a local retailer, using as sugar some material imported during war time as "Jelly Crystals". This imported material was a device to beat the import restrictions on sugar which were in force at that time; it contained insufficient gelatine, acid or flavour to pass to the public as true jelly crystals. On investigation, the manufacturer found that in making the appropriate additions to convert this sugar into satisfactory jelly crystals, he overlooked the fact that different containers of the imported sugar material varied in composition. Consequently, his final product had not the standard composition which he aimed to produce.

Permission to sell the existing stock of pre-packed jelly crystals was given provided that a stick-on label informed the purchaser that the sugar content was not in accordance with standard.

LABELLING IRREGULARITIES

The misuse of the word "Glucose" has again featured in the labelling offences recorded this year. This word has been used to describe the mixture of dextrins, maltose and dextrose (a syrup made from starch) in samples of Fruit Flavoured Milk and Glacé Cherries.

A label should disclose the presence of this syrup in a list of ingredients as Liquid Glucose (the official B.P. name). Alternatively, the constituent parts of the syrup may be declared. The unqualified description "Glucose" misleads because the consumer believes it to be the pure sugar, dextrose monohydrate. Food manufacturers are taking advantage of the confusion which exists concerning the two forms of Glucose and it is unlikely that they would end the confusion voluntarily. The British Pharmacopoeia should take an interest in this matter; an official book of standards such as the B.P. should be up to date and have regard to modern conditions. It is

absurd to give two similar official titles to describe two substances of such widely different composition viz. Purified Glucose for the pure sugar dextrose and Liquid Glucose for a syrup containing only one sixth dextrose.

The label of Real Minced Chicken which claimed 100% chicken was false. Whilst no other meat or filler was present, the method of preparation was such that a proportion of the "stock" was included. As a result the sample contained 70% chicken and 30% added water. The manufacturers undertook to amend the label to give a clear indication to the purchaser what she is buying.

A display card which was exhibited with a quantity of fruit cake in a shop window, prominently claimed that the cake was made with butter. Analysis of a sample of this cake showed that it was prepared from shortening consisting of 1 part butter and 7 parts of other edible fat (margarine and cooking fat).

In my opinion the description "Made with butter" implies that the whole of the added shortening is butter. Eventually this manufacturer undertook to use equal parts of butter and other fat and amend his claim to "half the fat is butter".

I have since obtained abundant evidence to show that the manner in which manufacturers of cake and biscuits use the words "Made with butter" and "containing butter" is likely to mislead the housewife. Public interest demands agreement between public analysts and the trade as to the meaning of these claims and steps have been taken to secure this.

Ham Cheese Spread was regarded as being a misleading description for an article which consisted of Cheese Spread with a small proportion of Ham as flavouring. The manufacturer disliked my suggested description "Cheese Spread—Ham Flavoured" but eventually agreed to amend his label to read "Cheese Spread with Ham". I regard this as a satisfactory compromise which tells the purchaser what she is buying. It is in accord with the composition of 92% cheese spread and 8% chopped ham. In addition, the manufacturer agreed to declare the presence of emulsifying salts as required by the Labelling of Food Order. This point had been overlooked in the label of the original sample.

The label of a sample of Coffee and Chicory Essence failed to declare the presence of Benzoic Acid in accordance with the Preservative Regulations. This finding was somewhat surprising because the manufacturers were a firm of very high repute and known to possess scientific staff. It was explained that during sugar rationing, the sugar content had been reduced and the addition of Benzoic Acid had been a necessity. It was admitted, however, that through an oversight, the requirement to declare the presence of preservative had not been met. Current production contained adequate sugar to safeguard keeping quality and the use of Benzoic Acid would be discontinued. The manufacturers were disturbed to find that this contravention of the law was possible with the supervision laid down in the firm and undertook to be even more watchful in future.

DRUGS

During the year 132 samples of drugs and medicinal preparations were examined and 7 samples (5.3%) were unsatisfactory.

GLYCERIN B.P. Three samples failed to conform to the prescribed B.P. standard in that they contained 2.5 to 3.8% excess water. They were pre-packed by the same manufacturing chemist and it was claimed that they originated from stock which was at least 2 years old. It seems probable that during this long storage, any imperfection in the sealing of the pre-packed bottles would permit the absorption of water from moist air and account for the excess water.

COMPOUND GLYCERIN OF THYMOL B.P.C. A sample of this preparation was found to be deficient of 82% of the glycerin required by the formula of the B.P.C. 1949.

An investigation by the manufacturers, a firm of high repute, revealed that an out of date formula had been used. They were disturbed to have to admit that a war time formula of 1941, designed to economise in the use of glycerin, had been retained in the works preparation file. Assurance was given that the old preparation card would be destroyed and replaced by the official 1949 B.P.C. formula. All stocks of the unsatisfactory preparation were withdrawn from wholesalers and retailers.

With the co-operation of a local pharmacist, preparations of Compound Glycerin of Thymol were prepared with and without glycerin. The analysis of these experimental preparations confirmed that the determination of glycerin based upon the copper content of the complex formed between glycerin and cupric chloride gives accurate results.

SYRUP OF SQUILLS. Although no standard is prescribed for this preparation it is reasonable to expect that the Vinegar of Squill which is used as an ingredient should be of B.P. quality. Accordingly it may be calculated that Syrup of Squills should contain 2.4 to 2.8w/v Acetic Acid.

A sample of the Syrup from a retail pharmacist contained only 1.8w/v Acetic Acid and a sample from the dispensary stock bottle contained the same proportion. The manufacturers claimed that they had retained samples of this particular batch and had confirmed that the Acetic Acid content was 2.2w/v. They suggested that the loss of Acetic Acid was probably due to storage in an unstoppered bottle. A laboratory experiment confirmed that a significant amount of Acetic Acid may be lost from an unstoppered bottle of Syrup of Squills.

MEDICATED SUGAR CONFECTIONERY. A proprietary preparation which was recommended for use as a medicine, was labelled with a statement of the active ingredients as required by law. The presence of a number of volatile oils was claimed, the total amount being 3.35v/w. Analysis of a sample of the sweets however, revealed only 0.45v/w volatile oils.

The manufacturer confessed to having adopted what I consider to be an astonishing method of manufacture for a preparation which is to carry therapeutic claims. The process consisted of the incorporation of the volatile ingredients into a hot sweet base by hand mixing. On occasions, this mixing was considered inadequate and the whole mixture was returned to the boiling pan, liquified, and again mixed by hand. It is not surprising that volatile ingredients in the finished product bore no relation to the proportion actually added and the manufacturer undertook to amend his process of preparation.

EXTRA STRONG SEIDLITZ POWDERS. Reasonable deviations in weight are permitted by the B.P.C. but an excess in weight was found in four blue papers of one sample. The manufacturer claimed that the tartrates of the blue paper tend to absorb moisture from the atmosphere but I cannot accept this explanation for an excess of 9% of the appropriate weight.

SWIMMING BATH WATER

Samples of the water from the swimming and paddling pools at Southsea Castle, Hilsea Lido and Park Road, were again examined bacteriologically and chemically during the summer season.

Whilst the quality of the swimming pool water has always been satisfactory the problem of heavy loads in the paddling pools during sunny periods remains. On such occasions contamination is greater than can be dealt with by the available chlorine. Bright sunshine adds to the difficulty because it removes effective chlorine by chemical reactions. Trials of additional treatment for the water at Hilsea are to be made next year.

CITY WATER SUPPLY

The City Water Supply was examined at monthly intervals throughout the year and was found to be of the highest standard both chemically and bacteriologically.

This high purity is due partly to a unique raw water but it is mainly due to the efficient and careful control of the chlorination and filtration process. At all times, residual chlorine of the order of 0·1 parts per million is to be found in the water in the mains. It is normally present in the desirable form of 1 part of free chlorine to 2 parts of chloramines. The free chlorine is a rapid bactericide and the latter a slower acting but more stable form which can be effective under conditions where the free chlorine has been dispersed.

FERTILISERS AND FEEDING STUFFS ACT, 1926

During the year 5 samples were examined under the Fertilisers and Feeding Stuffs Act. 3 fertilisers were satisfactory; 2 samples of the same fertiliser were both unsatisfactory in that they contained phosphates slightly in excess of the maximum permissible variation. One of these samples was also deficient of nitrogen. These discrepancies arose from inadequate mixing of the ingredients. In this case efficient mixing was of greater importance because the article consisted of a highly concentrated fertiliser and was pre-packed in small 5 oz. cartons.

ISLE OF WIGHT COUNTY COUNCIL

A total of 148 samples were examined for the Isle of Wight County Council, consisting of 132 under the Food and Drugs Act, 7 under the Fertilisers and Feeding Stuffs Acts, 3 under the Merchandise Marks Acts and 6 miscellaneous samples.

Of the Food and Drug Samples, 19 were classed as unsatisfactory or irregular (equivalent to 14·4%).

Objection was taken to the description "Cream Ices" for an ice cream which contained 8·3% of fat. The designation "Cream Ices" implies that the article is superior i.e. richer in fat than the average ice cream sold in the area concerned. From the analysis of 23 samples it has been shown that ice cream sold in the Isle of Wight contains an average of 9·1% of fat. Accordingly I expressed the view that, in this area, "Cream Ice" implies a fat content of at least 10%. The offending notice was withdrawn.

Three samples of Steak and Kidney Pie (out of 6 submitted) contained no identifiable kidney and were therefore falsely described. It is considered that if the proportion of kidney is so small as to make it impossible to identify kidney meat in each pie, then an alternative designation, such as Steak Pie (Kidney Flavour), should be used.

Other labelling offences concerned Butter Sweets (2 samples), Flavoured Milk and Marzipan (all using "Glucose" incorrectly); Tomato Juice (claim for vitamins) and Cheese and Macaroni (incomplete list of ingredients).

A sample of Protein Enriched Bread Rolls gave an analysis on the label which claimed 0·2 grams of fat per ounce. Whilst this was approximately correct for free fat (determined by Soxhlet) the total fat (determined by acid hydrolysis) was equivalent to 1·3 grams per ounce. Analytical figures quoted on a label should obviously be reasonably correct, and in this case the total fat was the nutritionally significant quantity. The manufacturer agreed to amend the label.

Two samples of Ammoniated Tincture of Quinine were deficient in ammonia due to poor storage conditions. Both manufacturers agreed to improve their packaging methods in order to prevent the recurrence of this loss of volatile constituent.

A deficiency in soluble solids of a sample of Marmalade was probably due to insufficient boiling in manufacture and could lead to poor keeping properties. The manufacturer was cautioned.

Of seven Fertilisers and Feeding Stuffs examined, only one, Bone Meal, was irregular containing considerably more phosphate than the guaranteed amount. Although a purchaser would not, therefore be prejudiced, it is an offence to under estimate the composition of a Fertiliser or Feeding Stuff beyond the prescribed limits.

Analysis of the three samples under the Merchandise Marks Act indicated that all claims made on the labels were reasonable.

BOROUGH OF GOSPORT

During the year 158 samples were submitted by the Borough of Gosport under the Food and Drugs Act (an increase of approximately 18% over last year) and of these 5 samples were unsatisfactory (3·2% compared with 7·4% for the preceeding year).

Of the 59 samples of milk examined, 2 contained less than the statutory minimum of fat due to inefficient mixing of bulk supplies. Subsequent samples taken from the same source were satisfactory. All the remaining samples of milk were free from added water and had satisfactory fat contents. Thirteen samples of Channel Island Milk satisfied the standard for this type of milk.

The 3 other unsatisfactory samples were as follows:—

One sample of Pork Sausages was found to contain undeclared preservative originating from the rusk used in the manufacture.

Due to inadequate mixing a sample of Jelly Crystals contained only 81% Sugar, whereas the legal minimum is 84%. The gelatine content (a more costly ingredient) was found to be correspondingly high.

The label on a sample of "Compound Epsom Salts Tablets" was considered to be unsatisfactory because the word "Compound" was printed in smaller type than the rest of the designation despite the fact that the therapeutic value depended more on the Phenolphthalein content than on the Epsom Salts.

The manufacturers, when approached, stated that the sample was old stock and they withdrew the supply and replaced with new stock labelled "Laxative Tablets containing Epsom Salts and Phenolphthalein".

MISCELLANEOUS SAMPLES

A wide variety of problems which have a chemical aspect are brought to this department. A few of these are included in the following notes:—

Toxicology—22 specimens were examined in connection with Coroners' investigations of 6 different cases. In 3 cases, analysis did not indicate the presence of any toxic substance.

Three cases of poisoning included one of Methadone, a toxic substance used in a proprietary cough mixture. In another case elementary Phosphorus and Volatile Oil were found in the stomach contents, confirming that the deceased consumed a mixture of rat poison and metal polish. An excessive amount of Barbiturates was found in the third case.

For the City Engineer, a number of Soil samples were examined for the presence of soluble sulphates. These salts have a deleterious effect upon concrete made from Portland Cement and special precautions must be taken when underground concrete structures are built in areas containing soluble sulphates.

Laboratory experiments confirmed that the gold leaf used for decorative purposes on the South Parade Pier would not be affected by the fumes from a temporary installation of gas burning radiators. Tar for use as preservative against corrosion of the steel structures of the Pier was shown to be free from acidity. An allegation that petrol was mixed with paraffin was disproved by analysis.

For the Health Department, samples of water draining into cellars and sub-floor spaces were examined to trace the source. The cause of an objectionable odour in the vicinity of Fratton Park Stand was shown to be the result of a mixture of decomposing leaves and bird faeces in the roof gutters. Two proprietary disinfectants had practically the same composition, although the quoted price varied considerably.

For the Education Department, a comparison was made of the composition and properties of floor sweeping compounds, degreasing powders and floor oils submitted with tenders for annual contract. Advice was given on the best value. In connection with the School Meals Service a comparison of the nutritional value of custard prepared from different proportions of different ingredients was made.

Private samples included a number of drippings which were examined for a local manufacturer to ensure a fat free from rancidity. The source of an unusual contamination was traced for a local ice cream manufacturer.

Samples of urine were examined for the defence in a case of alleged drunkenness in charge of a motor vehicle. The urine of a patient in hospital was also examined for traces of lead.

For neighbouring local authorities, samples of sewage effluent were examined to ascertain if adequate purification was being maintained to permit discharge into a river. The hardness of a public water supply was tested monthly.

For 327 miscellaneous samples, fees of £304 were charged. An additional sum of £530 was received for the analysis of samples from Gosport and the Isle of Wight. A total income of £834 has been received by the City Treasurer.

Private			Petersfield U.D.C. and R.D.C.			Aldershot U.D.C.		
Dripping	55		Beef	1		Water	12	
Ice Cream	36		Sewage Effluent ...	6		Health Department		
Lime Mortar	1		Drain Pipe	1		Ice Cream	6	
Oils	4		Milk	1		Water	5	
Cigarette	1		Water	6		Waxed Milk Carton	6	
Perfume	1		Soap Powder	1		Mineral Water ...	1	
Baking Tin	1		Deosan	2		Disinfectant ...	2	
Wooden Plugs	2		Stream Water	1		Bread	10	
Mineral Waters ...	3		Education Department			Canned Soup ...	1	
Fruit Concentrate ...	1		Dried Milk	1		Iodine	3	
Milk	16		Custard Powder ...	2		Pepper	1	
Beer	5		Sweeping Compounds	5		Condensed Milk ...	1	
Ditch Water	1		Floor Oils	7		Drinking Straws ...	1	
Water	5		Degreasing Compounds	2		Stained Cutlery ...	1	
Homogeniser Pack ...	1		Laboratory Information			Butter	1	
Plaster	1		Brandy	2		Fruit Pie	1	
Lubricating Oil	1		Water	9		Canned Fruit	1	
Urine	2		Deposit from Kettle	2		Prescription	1	
Upholstery	1		Honey	2		Canned Fruit Juice	1	
Soil	1		Milk	1		Deposit from Kettle	1	
City Architect			Bread Rolls	1		Milk	2	
Clinker Block	1		Syrup of Squills ...	1		Sherry	1	
Efflorescence	1		Glycerin of Thymol	4		Vomit	1	
Aggregate	1		Beer	1		Milk Bottle	4	
Borough of Ryde			Coroners' Specimens			Yeast	1	
Water	5		Portsmouth	18		Soya Flour	3	
Lemonade	2		South Hants	1		Malt Extract	1	
Sugar Confectionery	1		Isle of Wight	3		G.M. Stearate	3	
Contracts & Supplies			Havant U.D.C.			Debris from Gutter	1	
Toilet Soap	6		Water	1		Cereals	1	
Pathological Laboratory			Water—not drinking	2		Water—not drinking	4	
Urine	2		Canned Meat	1		City Engineer		
Isle of Wight Water Board			Meat Pie	1		Soil	99	
Water	9		Fareham U.D.C.			Petrol	2	
			Water	4		Tar	2	
						Lime	1	
						Gold Leaf	1	

